EXPRESSION OF INTEREST

(You are requested to fill up this data form to enable us to enter your details in our records.)

Photograph Applicant Photograph Co-Applicant

Application Date: / / 20

							APF	PLIC	ANT INFOR	MATION	I					
Name:									Mobile No -							
Father/Husban	ıd nar	ne:														
Correspondence	ce ado	dress	s:													
									Landline No							
Date of Birth							Residential	Status :		Resident		Non Resident				
Permanent Acc number	count						•		E-mail Id:		•	·			•	
ID Proof (Any one) – 1 st Applicant				Р	an Ca	ard		Passpo	ort		Ration card					
				٧	oter	ID		Driving License			PIO cert					
Address Proof (Any one) – 1 st Applicant					rivin	_		Telephone bill		Passport						
				٧	oter	ID		Ration card			Bank statement					
						C	O- A	PPL	ICANT INFO	RMATI	ON	•		•		
Name:							Mobile No									
Father/Husband name:																
Correspondence	ce ado	dress	s:													
											Landline No					
Date of Birth									Residential	Status :		Resident		Non Resident		
Permanent Acc	count								E-mail Id:			,			1	
ID Proof (Any one) – 1 st Applicant				Р	an Ca	ard		Passpo	rt		Ration card					
				٧	oter	ID		Driving License			PIO cert	tificate				
Address Proof (Any one) – 1 st					rivin icens			Telepho bill	hone		Passport					
Applicant			٧	Voter ID			Ration card			Bank statement						

Flat Area :	Sq. Ft.	Basic Rate (Rs.):	Per Sq.Ft.							
Unit type :		Total Basic Pric									
Other Cost: As applicable											
Apartment preference :	Floor Preference: a	1).	b). c).								
	Facing :(Right tick) 1	Central Green Fa	cing	2. 75 mtr. wide Road facing							
Payment Plan :	Construction Link Plan		Down payme	nt plan							
I/we remit herewith a so	um of Rs	by Cheque r	10	dated							
drawn on	favoring	ring as registration a									
Signature (s) of Applicant (s)											
First Ap	plicant	Co-Applicant									
Channel Partner Name:		Di	ate:								
Signature:		Stamp:									
	For Offi										
Full Registration Amo	ount Received:	Yes	No								
KYC Documents Attack	ned: A) I	D Proof	(B) Addres	s Proof							
Checked by Sales Per	rsonnel:										
Reg. Number:		Date:									
Signature:											