

V NAYAL VRINDAVAN

ite Address : C 2(% Kabir Chaura, Varanasi - 221001

D 59/44-, Rathyatra, M. Imoorgani (Main Road) Varahasi - 221010 . E-mail : vi⇔ /akplatinavns ⊕gmail.com



APPLICATION FORM

			Photo
DearSir,			
I/We; the undersigned request the per the Company's terms and cor stipulated by your Company.	a Flat/Office/: litions which [/v	De Agrage Space/Car Parking may be allo e have read and understood and shall abid	otled to me/us as Be by the same as
I/We further agree to sign and exec the Company's standard format,	ite any necessi	y agreement/s as and when desired by the C	ompany and an
I/We remit herewith a sum of Rs.	Aller Rupic	1 by Bank D	att/Chéoce No
DatedDrawn on drafts and cheaves to be made in f	AU, OI BAMA		
My/Our Particulars, as mentioned b 1. Applicant (Sole/First) Mr/Mr: Nationality Address (for communication	low, may be re	orded for all references and communication S/W/d/of	S. Harris Harris
1 Total Control Contro	Programme 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Address (Permanent)	
Telephone No.	FaxNo	PIN E-mail	A Service Control of the Control of
Mobile No: Professional Detail:	ate of Birth	Residential Status Resident Indian / No	n Resident India
Occupation/Business		Name of Employer / Business	
Address of the Employer/Bus Funding Details:	CSS SAME CONTROL OF THE CONTROL OF T	ContactNo Annualin	come
	thalf be paid c	It of : Own Sources / Savings / Investments	Financing from
2. Second Applicant - Mr/Mrs/N Nationality	The supplies of the supplies o	S/W/d/of	
Local Address (if any)			
Telephone No.	FOX	io. F-mail	
Mobile No. De	e of Birth	Residential Status Resident Indian / Non Re	esident India



VINAYAK VRINDAVAN

She Address : C 15/2, Kabir Chaula, Varanasi - 22 1001

D-59/44 , Rathyatra, Mahmoorgan (Main Road) Varanasi - 221010 E-mail : Mayakplatinavns@gmail.com



3.	Payment Plan	Dowr	Payment Installment
4.	Details of Flat to be Pu		
	Required Area		
	Basic Rate PrSq.ft.		
	Basic Sale Price		
	Flat Details		
-P	Unit Details		
	Floor		
• 5.	Car Parking Space	Open 1	Covered
6,	Club Membership 🔠	Yes	- No
7.	Comerfacing	i Yes	No.
8.	Roadfacing	Yes	No
9,	Parkfacing	Yes	No ***
10.	Arry other PLC		
11.	Allottee's Income Tax F	armanent Acc	Jrit No (PAN)
12.	Particulars of the Agen		
	Name		
	Address & Phone No.		
13.	Particulars of the Sales i	oraon estado	
	Name		
	Address & Phone No.		
	response to the same		
and the			DECLARATION:
. I/We	the undersigned (Sc	e/first, and \$€	ond Applicant) do declare that the above mentioned
partic	ulars/information's give	byme/us ara t	re and correct and nothing has been concealed therfore.
Date		en e	
Place)		Signature of Application(s)
	A property of the state of the state of		Office use Only
Ao	alication/Allotment		* Office use Offig
	Received by		ccepted
	Name		ejected
	Date	* (Amount)	cte
<u> </u>			Signature
Ne.A		1	