CHARLESBAY RESIDENCES LIMITED

APPLICATION FORM FOR PLOT ALLOCATION AT CHARLESBAY RESIDENCES

Notes:-

- 1. Please read this forms carefully before filling same.
- 2. This form should be completed in block letters only.
- 3. Forms that are improperly filled will not be processed.
- 4. All information supplied will be treated with confidentiality; therefore, please submit only TRUE information.
- 5. The passport photographs attached must be a recent copy and must be a true likeness of the individual(s) applying or that of the authorizing officer of the establishment making the application.
- 6. All enquiries should be directed to CharlesBay Residences Limited at info@charlesbayresidences.com or 09060009524



Applicant(s) is/are required to submit 2 recent passport size photographs, one of which should be certified as being a true likeness of the applicant.

1. Name(s) of subscriber(s): Other Names Surname First Name Surname First Name Other Names 2. Home Address: House Number Street Name State Country Post code (if applicable) 3a. Name of Employer / Business (if self-employed): 3b. Address: __ Number Street Name 3c. Occupation: _____ Position Held: _____ 3d. Duration at Current Job: 3e. State the RC No. where subscriber is a corporate body: _ 4. Contact Phone(s): Home_ Office. Mobile___

(Country Code)

Date of Birth:		7. Marital Status:	7. Marital Status:		
Nationality:					
. Property Informati	ion:				
Plot Size buying:	450sqm	600sq			
Number of plots bu	uying:	nces Lim			
Payment Plan:	Outright	6 months	12months		
Purpose for buying	g: Family Occ	cupation	Investment (buy & hold for a while)		
	Investment (build for re		ooperative Not Sure		
). How are you fund	ding this purchase?				
Commercial loa		rowing from pperative	Income from self & spouse		
Income from So	alaries	Income from business or	enterprise		
. When do you inte	nd to commence c	onstruction?			
Immediately?	Within 6	months	hin 12 months		
Within 2years	Not sure	е			
2. Next of Kin:	Title	First name	Surname		
Relationshin:			Garriame		
Residential Addres	ss:Ho	ouse number	Street name		
	City	Neares:	t bus stop		
Office or business		Neares	t bus stop		

13. How did you hear about	this property?			
Website	Instagram/	Facebook		WhatsApp
Referral (Please sta	ate name & number) _			
Realtor (Please sta	te name & number) _		K	977
Real Estate sites: (F	Pls be specific)			<u>ret</u> y
14. Name as you would war (Please fill out in block lette				
Title document and su any error in the name p issue		change after c	documents	
	DECLARAT	LION		
myself/ourselves do here on this application is true and belief and I/we herek me/us in response to this accordance with the term Sale and Sublease Agree	and correct to the k by undertake that an application shall be ans and conditions as	pest of my / or ny allotment the developed, m contained in t	ur knowle nat may be naintained	dge, information e allocated to and held in
Date			Signature	
	OFFICE USE	ONLY		
Source of Form:				
Form Received:				
Cost of Plot:				
Payment Confirmed				
Details checked				
Particulars of Plot Allotted:				
Checked by:				
Name	'O TITI	Signature		