

CITY-VIEW *Gardens*

Subscription Form

Personal Information

Title: *Dr/Prof/Chief/Mr/Mrs/Ms/Miss* (Please specify)

Surname _____ Other Names _____

Date of birth: _____ Sex: _____

Marital status: Single Married

Residential address: _____

Contact address: _____

E-mail: _____

How did you know about us? Filer Friend(s) Website Other _____

Other Information

Occupation _____ Employer _____

Employer's address _____

Next of kin _____

Address of next of kin _____

Telephone no (s) of next of kin _____

Relationship _____

No. of plots _____

Payment Option (Please Tick)

Full payment Installment 3 months 6 months
 10 months 12 months

Property Location _____

Intended type of building _____

Date: _____ Signature _____

CONDITION FOR SALE

- A. Acceptance of this application form from **Pishon Properties Ltd.**, or any of her Agents imposes no obligation on **Pishon Properties Ltd.**, and /or its Agents to Allocate any the properties be it land or home to the Subscriber.

- B. A conditional contract between Phion Ltd and the Subscriber will Arise Only upon the latter making the required payment for the purchase of the property, as Stated in the offer letter and / or payment invoice and after the Contract of sale Agreement is Executed by both parties; and any allocation thereof will only arise upon the subscriber Fulfilling all the necessary payments for the purchase of the property as stated in the Contract Of sale Agreement.

- C. The Subscriber shall execute the Contract of Sale Agreement within seven (7) days of paying The first installment.

- D. In the event of the Subscriber withdrawing from this transaction before signing the Contract of Sale Agreement, the total amount paid so far, less 10% Administrative Fee shall be refunded to him.

- E. Upon its execution, the terms in the Contract of Sale Agreement shall apply to and bind Parties to this transaction until the final installment is paid and Deed of Assignment is Executed.

DECLARATION

I/We do hereby declare that the information give in this application form is to the best of my/our knowledge correct and I /We believe the same to be true.

DATE

SIGNATURE

FOR OFFICE USE ONLY

DEPOSIT (N): _____

RECEIVED BY: _____

DATE RECEIVED: _____