

Please fill-up all spaces and put N/A to all fields not applicable.

This information sheet is required to be accomplished by the buyer or, in the case of corporations, any authorized signatory. The information provided will be treated with utmost confidentiality. Information provided will be used to prepare your Contract to Sell and help us give you prompt and quality service.

PROJECT:		TOWER:		UNIT NO.:	
UNIT CLASSIFICATION:		TOTAL CONTRACT PRICE:		TYPE OF FINANCING:	
PROJECT DIRECTOR:	DIRECTOR OF SALES:	PROPERTY SPECIALIST:		BROKER (LOCAL/ INT'L):	
PURPOSE OF PURCHASE:		INVESTMENT		2ND HOME	
<input type="checkbox"/> PRIMARY RESIDENCE <input type="checkbox"/> OTHERS PLEASE SPECIFY:		<input type="checkbox"/> INVESTMENT		<input type="checkbox"/> 2ND HOME	
<input type="checkbox"/> GIFT		<input type="checkbox"/> PRINT AD		<input type="checkbox"/> INTERNET	
<input type="checkbox"/> OTHERS PLEASE SPECIFY:		<input type="checkbox"/> AGENT		<input type="checkbox"/> EXHIBIT	
<input type="checkbox"/> REFERRAL		<input type="checkbox"/> OTHERS		HOW DID YOU FIND OUT ABOUT THE PROJECT:	
PLEASE SPECIFY (which print ad, which exhibit location, etc.):		In connection with my/our Reservation Agreement, the buyer would like the purchase to be registered as follows:		OWNERSHIP:	
<input type="checkbox"/> SOLELY		<input type="checkbox"/> MARRIED COUPLE		<input type="checkbox"/> CO-OWNER	
<input type="checkbox"/> CORPORATION		<input type="checkbox"/> PARTNERSHIP			

PRINCIPAL BUYER'S INFO

FIRST NAME:		MIDDLE NAME:		LAST NAME:	
DATE OF BIRTH:		CIVIL STATUS:		<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWER / SEPARATED / DIVORCED	
TIN NO.:		CITIZENSHIP:		GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
PASSPORT NUMBER / PLACE OF ISSUE / DATE ISSUED / EXPIRATION DATE:			CTC NUMBER / PLACE OF ISSUE / DATE ISSUED:		
PERMANENT RESIDENCE ADDRESS:		MAILING ADDRESS:		<input type="checkbox"/> YES <input type="checkbox"/> NO (If no, please specify alternate mailing address in a separate letter.)	
OWNERSHIP OF CURRENT RESIDENCE:		LIVING W/ RELATIVES		YEARS OF RESIDENCY:	
<input type="checkbox"/> OWNED <input type="checkbox"/> RENTED		<input type="checkbox"/> MORTGAGED			
RESIDENCE PHONE NO.:		MOBILE NO.:		EMAIL ADDRESS:	
EDUCATIONAL ATTAINMENT:		SCHOOL / UNIVERSITY:			
<input type="checkbox"/> HIGHSCHOOL <input type="checkbox"/> COLLEGE <input type="checkbox"/> POST GRAD <input type="checkbox"/> OTHERS					
NO. OF CARS: (OWNED)	NO. OF CARS (MORTGAGED)	NO. OF DEPENDENTS:	NO. OF CHILDREN:	1-6 YRS OLD	ELEMENTARY
EMPLOYMENT TYPE:		LOCALLY EMPLOYED		EMPLOYED ABROAD	
<input type="checkbox"/> PROPRIETOR <input type="checkbox"/> LOCALLY EMPLOYED		<input type="checkbox"/> EMPLOYED ABROAD		BUSINESS NAME / EMPLOYER'S NAME:	
OFFICE ADDRESS:					
INDUSTRY:		RANK / POSITION:		YEARS IN SERVICE:	
OFFICE PHONE NO.:		FAX NO.:		EMAIL ADDRESS:	
				GROSS MONTHLY INCOME:	

SPOUSE / CO-BUYER'S INFORMATION:

FIRST NAME:		MIDDLE NAME:	LAST NAME:	
TIN NO.:		CITIZENSHIP:	GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
CTC# / PLACE OF ISSUE / DATE ISSUE:		PASSPORT NUMBER / PLACE OF ISSUE / DATE ISSUED / EXPIRATION DATE:		EDUCATIONAL ATTAINMENT:
EMPLOYER / COMPANY NAME:			GROSS MONTHLY INCOME	
OFFICE ADDRESS:				
INDUSTRY:		RANK / POSITION:		YEARS IN SERVICE:
OFFICE PHONE NO.:	FAX NO.:	EMAIL ADDRESS:		MOBILE PHONE NO.:

BANK REFERENCE (Both principal and spouse / co-buyer)

ACCOUNT TYPE (savings, check, etc.)	BANK / INSTITUTION	ADDRESS / BRANCH	ACCOUNT NO. / CC#	
ACCOUNT TYPE (savings, check, etc.)	BANK / INSTITUTION	ADDRESS / BRANCH	ACCOUNT NO. / CC#	
ACCOUNT TYPE (savings, check, etc.)	BANK / INSTITUTION	ADDRESS / BRANCH	ACCOUNT NO. / CC#	
LOAN TYPE:	BANK / INSTITUTION:	ORIGINAL AMOUNT:	OUTSTANDING BALANCE:	MATURITY DATE:
LOAN TYPE:	BANK / INSTITUTION:	ORIGINAL AMOUNT:	OUTSTANDING BALANCE:	MATURITY DATE:
LOAN TYPE:	BANK / INSTITUTION:	ORIGINAL AMOUNT:	OUTSTANDING BALANCE:	MATURITY DATE:

ATTORNEY-IN-FACT (if working abroad) Please attach notarized SPA:

FIRST NAME:		MIDDLE NAME:	LAST NAME:	
RESIDENCE PHONE NO.:		OFFICE PHONE NO.:	EMAIL ADDRESS:	

I / We hereby certify that all information given in this application is valid, true, correct and complete and that the signatures/s appearing herein belong/s to me/us and is/are genuine and binding upon me/us.

I/We hereby authorize Landenmore Properties, Inc. and its internal and external representatives to obtain any information from and/or conduct independent verification of information provided by me/us in connection with this purchase with other institution/third person. I/We expressly consent to the disclosure of such information/ third person to Landenmore Properties, Inc./its representatives of any such information and I/We hereby expressly waive any and all of my/our rights under applicable laws relative to the confidentiality of such information.

.....
PRINCIPAL BUYER (sign over printed name) / DATE

I/We understand that the approval of this purchase is solely discretionary upon Landenmore Properties, Inc. and that non disclosure/falsification of information as herein required shall be sufficient ground for disapproval of my/our purchase and/or privileges.

.....
SPOUSE / CO-BUYER (sign over printed name) / DATE