



ELITE FORE PVT. LTD.

Serial No.

PERSONAL INFORMATION (Capital Letters only)

Date	<input type="text"/>	Sole/ First Applicant Details	
Mr./Mrs./Ms.	<input type="text"/>		
Son / Daughter / Wife of	<input type="text"/>		
DOB	<input type="text"/>	Occupation	<input type="text"/>
PAN No.	<input type="text"/>	Mobile	<input type="text"/>
Email	<input type="text"/>		
Permanent Address	<input type="text"/>		
	<input type="text"/>		
Correspondence Address	<input type="text"/>		
	<input type="text"/>		

Receipt
Passport size
Photograph

PROFESSIONAL DETAILS

<input type="checkbox"/> IT	<input type="checkbox"/> ITES/BPO/KPO	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Retail Service	<input type="checkbox"/> Financial Services
<input type="checkbox"/> Hospital Service	<input type="checkbox"/> Medical / Pharmaceuticals	<input type="checkbox"/> Travel Transport	<input type="checkbox"/> Real Estate	
<input type="checkbox"/> Media/Entertainment	<input type="checkbox"/> Government/PSU/Defence	<input type="checkbox"/> Other		
Function				
<input type="checkbox"/> Accounts/Finance	<input type="checkbox"/> Sales/Marketing	<input type="checkbox"/> Operations	<input type="checkbox"/> Human Resource	<input type="checkbox"/> Administrator
<input type="checkbox"/> Doctor	<input type="checkbox"/> Legal	<input type="checkbox"/> Production	<input type="checkbox"/> Other	

PROJECT INFORMATION

Project Name	<input type="text"/>												
Project Type	<input type="text"/>	Product	<input type="text"/>	Area	<input type="text"/>								
Payment Plan	<input type="checkbox"/> CLP	<input type="checkbox"/> Time Linked	<input type="checkbox"/> Flexi	<input type="checkbox"/> Down Payment									
Basic Selling Price (BSP) Prices are exclusive of all taxes													
Booking Rate	<input type="text"/>	Net Booking Rate	<input type="text"/>										
Preferential Location Charges (PLC)													
Floor	<input type="text"/>	Front Facing	<input type="checkbox"/>	Park Facing	<input type="checkbox"/>								
Pool Facing	<input type="checkbox"/>	Car Parking	<input type="checkbox"/> 1	<input type="checkbox"/> 2	Club Membership								
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>										

Co./ Second Applicant/ Nominee Details

Mr./Mrs./Ms.

Son/Daughter/Wife of

DOB Occupation

PAN No. Mobile

Email

Permanent Address

Correspondence Address

Receipt
Passport size
Photograph

PAYMENT DETAILS

Amount In Words

Instrument Type Cheque DD NEFT / RTGS

Instrument No. Instrument Date

Bank Name Branch

Source of Payment Own Funds Loan

DISCLAIMER

I/We, the undersigned applicant (Sole/First and Co/Second applicant), do hereby declare that the above mentioned particulars/information given by me/us irrevocable, true and correct to my/our knowledge and no material fact has been concealed therefor.

Signature of Sole / First Applicant

Signature of Co./ Second Applicant/ Nominee

FOR OFFICE USE ONLY

Team Head Name

Team Member Name

B.A.Name

Business Associates

Team Head

Operation