

CONTRACT DETAILS FORM

PROPERTY DETAILS					
<input type="checkbox"/> Northtown	<input type="checkbox"/> Northcrest	<input type="checkbox"/> Wood Lane Residences	TYPE OF BUYER		
<input type="checkbox"/> Fernwood	<input type="checkbox"/> Eden Ridge	<input type="checkbox"/> Others _____	<input type="checkbox"/> Individual <input type="checkbox"/> Corporate		
CONTRACT DETAILS - PRINCIPAL BUYER					
CONTRACT NAME (Individual Buyer)				Occupation/Profession	
Last Name _____ First Name _____ Middle Name _____					
PRIMARY/MAILING ADDRESS				Civil Status	Age
_____ Zip Code _____				<input type="checkbox"/> Single <input type="checkbox"/> Married	<input type="checkbox"/> Widow/er <input type="checkbox"/> Separated
SECONDARY ADDRESS				Sex	Birthdate (mm/dd/yy)
_____ Zip Code _____				<input type="checkbox"/> Male <input type="checkbox"/> Female	Place of Birth
HOME PHONE NO.	FAX NO.	MOBILE NO.	T.I.N.	RELIGION	
(please include country and area codes, if possible)		EMAIL ADDRESS	CITIZENSHIP	<input type="checkbox"/> Roman Catholic <input type="checkbox"/> Protestant <input type="checkbox"/> Others (pls. specify) _____	
ANY GOVERNMENT ISSUED I.D. (please check one)					
<input type="checkbox"/> SSS/GSIS _____ <input type="checkbox"/> Driver's License _____ <input type="checkbox"/> Others _____					
<input type="checkbox"/> PRC _____ <input type="checkbox"/> Passport _____					
BUSINESS / EMPLOYMENT INFORMATION					
Company / Business Name			Company / Business Address		
Office/Business Phone No.	Fax No.	Employment Status	Position	Profession	
		<input type="checkbox"/> Local <input type="checkbox"/> OFW <input type="checkbox"/> Self-Employed			
SPOUSE'S INFORMATION					
NAME OF SPOUSE				Occupation / Profession	
Last Name _____ First Name _____ Middle Name _____					
HOME PHONE NO.	MOBILE NO.	EMAIL ADDRESS	T.I.N.	Citizenship	
FAX NO.	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Employment Status	No. of Children		
(please include country and area codes, if possible)		<input type="checkbox"/> Local <input type="checkbox"/> Self-employed <input type="checkbox"/> OFW <input type="checkbox"/> Expatriate			
BUYER WITH A SPECIAL POWER OF ATTORNEY (SPA)					
SPA'S Name				Occupation/Profession	
Last Name _____ First Name _____ Middle Name _____					
RESIDENCE ADDRESS				Civil Status	Age
_____ Zip Code _____				<input type="checkbox"/> Single <input type="checkbox"/> Married	<input type="checkbox"/> Widow/er <input type="checkbox"/> Separated
PREFERRED MAILING ADDRESS				Sex	Birthdate (mm/dd/yy)
_____ Zip Code _____				<input type="checkbox"/> Male <input type="checkbox"/> Female	Place of Birth
HOME PHONE NO.	FAX NO.	MOBILE NO.	T.I.N.	CITIZENSHIP	
(please include country and area codes, if possible)		EMAIL ADDRESS			
ANY GOVERNMENT ISSUED I.D. (please check one)					
<input type="checkbox"/> SSS/GSIS _____ <input type="checkbox"/> Driver's License _____ <input type="checkbox"/> Others _____					
<input type="checkbox"/> PRC _____ <input type="checkbox"/> Passport _____					

CORPORATE BUYER				
Name of Corporation			Nature of Business	
BUSINESS ADDRESS			BUSINESS PHONE NO.	FAX NO.
NAME OF AUTHORIZED SIGNATORY			DESIGNATION/POSITION	
Last Name First Name Middle Name				
PREFERRED MAILING ADDRESS			Sex	Birthdate (mm/dd/yy)
Zip Code			<input type="checkbox"/> Male	Place of Birth
			<input type="checkbox"/> Female	
HOME PHONE NO.	FAX NO.	MOBILE NO.	T.I.N.	CITIZENSHIP
		EMAIL ADDRESS	Civil Status	
(please include country and area codes, if possible)			<input type="checkbox"/> Single <input type="checkbox"/> Widow/er	
			<input type="checkbox"/> Married <input type="checkbox"/> Separated	
ANY GOVERNMENT ISSUED I.D. (please check one)				
<input type="checkbox"/> SSS/GSIS <input type="checkbox"/> Driver's License <input type="checkbox"/> Other's				
<input type="checkbox"/> PRC <input type="checkbox"/> Passport				
OTHERS				
Bank References		Reason for the Purchase (check all, if applicable)		
Banks	Type of Account	<input type="checkbox"/> Investment <input type="checkbox"/> For children <input type="checkbox"/> New Home <input type="checkbox"/> Others		
		What are the factors that you had considered in buying Alsons Properties?		
		<input type="checkbox"/> Reliability <input type="checkbox"/> Prestige <input type="checkbox"/> Unique Concept Development		
		<input type="checkbox"/> Trustworthiness <input type="checkbox"/> Attractive Payment Terms <input type="checkbox"/> Value-for-Money		
		<input type="checkbox"/> Integrity <input type="checkbox"/> Service <input type="checkbox"/> Location		
		<input type="checkbox"/> Others		
FROM WHERE HAVE YOU HEARD OF OUR DEVELOPMENT				
<input type="checkbox"/> Advertisement <input type="checkbox"/> Newspaper write-up <input type="checkbox"/> Sales Exhibit <input type="checkbox"/> A friend referred it to you <input type="checkbox"/> An Agent approached you				
<input type="checkbox"/> Others				
HAVE YOU PURCHASED A LOT FROM ALSONS PROPERTIES BEFORE? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, please state project: <input type="checkbox"/> Ladislawa Garden Village <input type="checkbox"/> Las Terrazas <input type="checkbox"/> Fernwood				
<input type="checkbox"/> Woodridge Park <input type="checkbox"/> Northcrest <input type="checkbox"/> Others (pls. specify)				

SPECIAL INSTRUCTIONS / REMARKS (Please specify):

Signature of buyer(s)

Date