

BUYER'S INFORMATION FORM

V0308.19



UNIT DETAILS

PROJECT	:
UNIT NUMBER	:
PHASE / TOWER	:
UNIT TYPE	:
PAYMENT TERMS	:
EQUITY START DATE	:

SELLERS DATA

BROKER / AGENT	:
AGENT TIN	:
ADDRESS	:
CONTACT NO	:
REALTY	:
TEAM LEADER	:

PRINCIPAL BUYER

LAST NAME															
GIVEN NAME															
MIDDLE NAME															
PHILIPPINE TAX IDENTIFICATION NUMBER (TIN)															
TIN ENGAGED IN BUSINESS		NO													
		YES	IF YES _____ SINGLE PROPRIETORSHIP _____ PARTNERSHIP _____ CORPORATION												
PHILIPPINE ADDRESS - PRIORITY FOREIGNER WITH NO PH ADDRESS, PROJECT ADDRESS WILL APPEAR ON INVOICES	HOUSE NO.			SUBDIVISION/BLDG/STREET								BARANGAY			
	CITY			PROVINCE								POSTAL CODE			
FOREIGN ADDRESS ( OPTIONAL)															
CONTACT NUMBER															
EMAIL ADDRESS															
BIRTHDATE (MM/DD/YEAR)			/			/									
CIVIL STATUS	___ SINGLE ___ MARRIED ___ WIDOWED										___ LEGALLY SEPARATED				
CITIZENSHIP / RELIGION	/														
GENDER	___ MALE			___ FEMALE											
EMPLOYMENTTYPE	___ EMPLOYED ___ SELF EMPLOYED ___ RETIRED ___ OFW														
EMPLOYER NAME															
EMPLOYER/OFFICE ADDRESS															
EMPLOYER'S/OFFICE CONTACT NUMBER															
MONTHLY SALARY / DESIGNATION	/														

SPOUSE

LAST NAME															
GIVEN NAME															
MIDDLE NAME															
SPOUSE TIN															
CONTACT NUMBER / CITIZENSHIP	/														
BIRTHDATE (MM/DD/YEAR)			/			/									
GENDER	___ MALE			___ FEMALE											
EMPLOYMENTTYPE	___ EMPLOYED ___ SELF EMPLOYED ___ RETIRED ___ OFW														
EMPLOYER NAME															
EMPLOYER/OFFICE ADDRESS															
EMPLOYER'S/OFFICE CONTACT NUMBER															
MONTHLY SALARY / DESIGNATION	/														

ATTORNEY-IN-FACT									
ATTORNEY-IN-FACT									
NAME	SURNAME			GIVEN NAME			MIDDLE NAME		
CONTACT NUMBER									
EMAIL ADDRESS									
ADDRESS	HOUSE NO. /FLOOR/BDLG.			STREET			BARANGAY		
	CITY	PROVINCE			POSTAL CODE				
CORPORATE BUYER									
NAME OF CORPORATION									
PHILIPPINE TAX IDENTIFICATION NUMBER (TIN)									
OFFICE ADDRESS	FLOOR/BLDG.			SUBDIVISION/STREET			BARANGAY		
	CITY	PROVINCE			POSTAL CODE				
CONTACT NUMBER									
EMAIL ADDRESS									
AUTHORIZED SIGNATORY OF CORPORATION									
LAST NAME									
GIVEN NAME									
MIDDLE NAME									
DESIGNATION									
CONTACT NUMBER									
EMAIL ADDRESS									
ACKNOWLEDGEMENT									
<p>I acknowledge that the foregoing informtaion are true and correct. <b>When TIN supplied is invalid, buyer shall shoulder whatever penalties implied by BIR.</b></p> <div></div> <div>PRINCIPAL BUYER'S SIGNATURE OVER PRINTED NAME</div> <div>DATE SIGNED : _____</div>									
DO NOT FILL-OUT ANYTHING BELOW (FOR DEVELOPER'S USE ONLY)									
SALES IN CHARGE :									
TIN ABOVE SUPPLIED WITH:	<input type="checkbox"/>	PRINCIPAL BUYER'S BIR ID							
	<input type="checkbox"/>	TIN FOR VERIFICATION (WITH FORM 1904)							
	<input type="checkbox"/>	NO TIN, FOR BIR PROCESSING							
		____ BIR 1904 FORM ____ 2 VALID IDs ____ Birth Date _____							