BOOKING FORM	
Project Name :	Location:
Building:	Villa No. Booked
Floor:	Type of Villa :
rioor:	Type of villa:
Area Of Villa Booked :	
Total Value Of Villa :	0
Stamp Paper & Registration :	0
Registration Expenses:	
Other Outgoing	
Name of Purchaser 1)	
D/o	
PAN NUMBER	
Name of Purchaser 2)	
SON/WIFE/DAUGHTER OF	
PAN NUMBER	
Marital Status	
Occupation	
Age	
Address For Corespondence	
Mob No :-	
Email Id:-	
Date Of Payment Received	
Payment Received Details	
Date Of Commencement	
Expected Date of Completion	
Date Of Agreement To Be Signed	
Accepted By Me/Us	
Signature Of Purchaser No 1	Signature Of Purchaser No. 2
SIGNATURE :	
DATE:	
Remark	
	FF-1, Opp. Mall De Goa, Nr. Bank of Baroda, Porvorim. Customer Care No:
7757965999, Email id:- care@goapropertyhub.com	