



Paramount Property Ventures, Inc.

CHECKLISTS OF REQUIREMENTS

GENERAL INITIAL REQUIREMENTS (IREQ) OR RESERVATIONS					
General Requirements:	SINGLE	MARRIED	OFW	FOREIGNERS	CORPORATE
The following Documents should be completely filled out & signed:					
Buyer's Information Sheet					
Reservation Fee:					
Lot Only - P20,000.00					
House and Lot - P30,000.00					
Completely filled out and signed Purchase Application Form					
Special Power of Attorney					
Sworn Statement					
Affidavit of Waiver					

GENERAL COMPLETE REQUIREMENTS (CREQ)					
General Requirements:	SINGLE	MARRIED	OFW	FOREIGNERS	CORPORATE
The following Documents should be completely filled out & signed:					
Contract to Sell					
Deed of Covenants & Restrictions					
Deed of Sale with Real Estate Mortgage (DOSREM)					
Sketch of House					
TIN Number [application form available for TIN]					
Residence Certificate / Community Tax Certificate					
Latest photo of purchaser and spouse (2x2 size)					
Proof of Billing					
Photocopy of Marriage Certificate					
Passport/ Visa					
Post Dated Checks					
Photocopy of Certificate of Registration with SEC or DTI					
Photocopy of Articles of Incorporation and By-Laws					
Board Resolution of Appointed Representative					

[IF YOU WISH TO PAY SPOT CASH, PLEASE FURNISH US ADDITIONAL REQUIREMENTS LISTED BELOW]

SPOT CASH w/ IREQ & CREQ					
General Requirements:	SINGLE	MARRIED	OFW	FOREIGNERS	CORPORATE
The following Documents should be completely filled out & signed:					
Deed of Absolute Sale					
Full Payment (10% cash or check payment)					
PDC for 10% balance for full payment					

NOTE: For questions about buyer requirements to purchase a property from Paramount Property Ventures, contact our Business Center:
(63)(32)233.0061 or (63)(32)233.0062 or email us at inquiries@paramount.ph



BUYER'S INFORMATION SHEET

PHILIPPINE PARAMOUNT PROPERTY VENTURES, INC.

FORM R-02

Please print and fill out form completely to avoid delay in processing.

BUYER'S INFORMATION			
FAMILY NAME		CITIZENSHIP <input type="checkbox"/> Filipino <input type="checkbox"/> Foreign, country _____	
FIRST NAME		CIVIL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Annulled / Divorced	
SALUTATION <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Fr. <input type="checkbox"/> Prof. <input type="checkbox"/> Others _____		MIDDLE	BIRTHDATE [DD/MM/YYYY] AGE SEX <input type="checkbox"/> M <input type="checkbox"/> F
HOME PHONE NUMBER		PRESENT HOME ADDRESS [NO., STREET, CITY, MUNICIPALITY, PROVINCE, ZIP]	
MOBILE NUMBER			
OCCUPATION <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Self-employed		EMPLOYMENT TYPE <input type="checkbox"/> Local <input type="checkbox"/> OFW	EMPLOYMENT STATUS <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Probationary <input type="checkbox"/> Contractual
PRESENT EMPLOYER / BUSINESS NAME		POSITION	OFFICE PHONE NUMBER
EMPLOYER OR BUSINESS ADDRESS [NO., STREET, CITY, MUNICIPALITY, PROVINCE, ZIP]		YEARS IN CURRENT WORK / BUSINESS:	EMAIL ADDRESS
		GROSS ANNUAL INCOME	TAX IDENTIFICATION NUMBER (TIN)
IF PRINCIPAL BORROWER IS AN OFW Total number of years abroad _____ Date of contract ends _____ Currency of Income _____		ARE YOU ACCREDITED WITH PPPVI AS: <input type="checkbox"/> Supplier <input type="checkbox"/> Contractor <input type="checkbox"/> Seller IF ACCREDITED, BUSINESS PARTNER NUMBER: _____	
		IS BUYER AN EXISTING CUSTOMER OF PPPVI? <input type="checkbox"/> No <input type="checkbox"/> Yes, customer number: _____	

To be filled out by the Co-owner or Spouse (if any). If Buyer has both a Co-Owner and a Spouse, please fill out another set of Buyer's Information Sheet at the "Co-Buyer's / Spouse's Information" section only.

CO-BUYER'S / SPOUSE'S INFORMATION			
FAMILY NAME		CITIZENSHIP <input type="checkbox"/> Filipino <input type="checkbox"/> Foreign, country _____	
FIRST NAME		CIVIL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Annulled / Divorced	
SALUTATION <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Fr. <input type="checkbox"/> Prof. <input type="checkbox"/> Others _____		MIDDLE	BIRTHDATE [DD/MM/YYYY] AGE SEX <input type="checkbox"/> M <input type="checkbox"/> F
HOME PHONE NUMBER		PRESENT HOME ADDRESS [NO., STREET, CITY, MUNICIPALITY, PROVINCE, ZIP]	
MOBILE NUMBER			
OCCUPATION <input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Self-employed		EMPLOYMENT TYPE <input type="checkbox"/> Local <input type="checkbox"/> OFW	EMPLOYMENT STATUS <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Probationary <input type="checkbox"/> Contractual
PRESENT EMPLOYER / BUSINESS NAME		POSITION	OFFICE PHONE NUMBER
EMPLOYER OR BUSINESS ADDRESS [NO., STREET, CITY, MUNICIPALITY, PROVINCE, ZIP]		YEARS IN CURRENT WORK / BUSINESS:	EMAIL ADDRESS
		GROSS ANNUAL INCOME	TAX IDENTIFICATION NUMBER (TIN)
IF PRINCIPAL BORROWER IS AN OFW Total number of years abroad _____ Date of contract ends _____ Currency of Income _____		ARE YOU ACCREDITED WITH PPPVI AS: <input type="checkbox"/> Supplier <input type="checkbox"/> Contractor <input type="checkbox"/> Seller IF ACCREDITED, BUSINESS PARTNER NUMBER: _____	
		IS BUYER AN EXISTING CUSTOMER OF PPPVI? <input type="checkbox"/> No <input type="checkbox"/> Yes, customer number: _____	

I, the undersigned buyer, certify that the information given are true to the best of my knowledge and belief.

BUYER or AUTHORIZED REPRESENTATIVE

DATE

BUYER'S SPOUSE / CO-OWNER

DATE

TERMS AND CONDITIONS

I, the undersigned buyer, declare that I have inspected the Lot/Unit or its plans & specifications and have found the same to be satisfactory, and I understand and agree to the following:

1. To issue postdated checks, if required, for the payment of this purchase from the downpayments to the last installment.
2. That should there be a discrepancy between the manually computed amount (reservation fee, down/equity payments, financing amount and total contract price) versus the system computation of the TCP and the downpayment schedule, I agree to pay the system computed amounts.
3. That the reservation fee is non-transferable and non-refundable. Any transfer made by me shall be void and shall be cause for cancellation of this reservation and forfeiture of my reservation money and any other payments I may have made in connection with this reservation.
4. That PPPVI shall have the option, without necessity of notice of any kind to me as the undersigned Buyer, to automatically cancel my purchase application and forfeit as liquidated damages whatever payments I have made in the event of any of the following:

CERTIFICATION

I, the undersigned Buyer, certify that I agree to the terms and conditions governing this sale transaction. I further attest to the correctness of the personal information stated in this application form.

SELLER INFORMATION

REVIEWED AND APPROVED BY

_____ _____

_____ _____



SKETCH OF RESIDENCE

Please print and fill out form completely to avoid delay in processing.

BUYER'S RESIDENTIAL SKETCH

FAMILY NAME		SALUTATION <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Fr. <input type="checkbox"/> Prof. <input type="checkbox"/> Others _____	[ADDRESS] STREET	
FIRST NAME			[ADDRESS] CITY, MUNICIPALITY	
MIDDLE			[ADDRESS] PROVINCE, COUNTRY, ZIP	

Provide a sketch showing the approximate location of your residence or current home address and its relative position.
Please provide as much detail as possible.

Sketch of Residence _____

_____ Buyer's Signature over Printed Name	_____ Date	Landmarks leading to residence: _____ _____ _____ Color of gate: _____
_____ Sales Associate's Signature	_____ Date	
_____ Verified by: [CRS]	_____ Date	

I, the undersigned buyer, certify that the information given are true to the best of my knowledge and belief.

BUYER or AUTHORIZED REPRESENTATIVE

DATE

BUYER'S SPOUSE / CO-OWNER

DATE