

RESERVATION AGREEMENT FORM



APARTMENT DEVELOPMENT SITUATED AT
READING PEN, ST. JAMES Vol. 1247/ Fol 324

UNIT TO BE RESERVED

Apartment #

LOCATION	<input type="radio"/> North	<input type="radio"/> South				
TYPE	<input type="radio"/> 1 Bedrm	<input type="radio"/> 2 Bedrm	<input type="radio"/> 3 Bedrm			
FLOOR	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6

APPLICANT

Full Name (First, Middle, Last)

DOB (DD/MM/YY)

Sex

Male Female

ADDRESS

Phone Contact 1

Phone Contact 2

email

TRN

Marital Status

Married Single

Profession

Name of Employer

Length of time

Employer address

How will you finance the purchase

Mortgage Cash

Name of mortgage company/Broker

REALTOR

HOW DID YOU HEAR ABOUT LOT.3?

Website Family Friend Passing by Advert Previous purchaser Other _____

Name of Attorney

Attorney email

Reservation Fee _____ Selling Price _____

In consideration of Concept Homes Limited holding the unit applied for, I/we hereby authorize Concept Homes to deduct the sum of US\$200.00 from earnest money paid by me/us, in consideration of costs incurred in the event that I/we should cancel the reservation.

The sum paid is a "good faith" payment only and will be conditional on me/us entering into a sales contract within 2 months from the date hereof or as we may both agree in writing. The said sum shall be credited to the purchase price of the unit.

Signature

Date