



DREAM HAVEN HOUSING LTD.

5B-1, Ittefaq Bhaban, 1 R.K Mission Road, Dhaka-1203

Tel: 02-9512433, Mobile : 01915-618117

www.dhhl.ltd

PP Size Photo
of Applicant

Date :/...../.....

Booking / Application Form

1. Name (Capital Letter) :

2. S/O, W/O, D/O :

3. Mother's Name :

4. Date of Birth :

5. Profession :

6. Religion :

7. Nationality :

8. Permanent Address :

9. Present Address :

10. Phone : Office :

Res :

Mobile :

E-mail Web :

11. Nominee's: Name :

S/O, W/O, D/O :

Nominee's Address :

Nominee's Relation :

Date of Birth :

Nominee's Nationality :

12. Reference :

13. Description of Applied Plot : Name of Project :

Block

Plot No :

Road No :

Face

Plot Size :

14. Mode of Payment : One time / Installment :

Booking Amount:

Installment Amount :

15. Please give details of your payment : Cash/Cheque/PO/DD/No :

Bank :

Branch :

Date:

Tk.

Taka In Word:

PP Size Photo
of Applicant



Declaration

I/We do here by declare that the above mentioned information and description are the best of my/our knowledge. I/We further declare that I/We have not concealed any thing nor I/We have given any wrong information. I/We have gone through the pamphlet of the Company Containing the project and plan understood the conditions of allotment of plot and also I/We have known about the registration of the transfer deed after payment of full price the decision of the company regarding the allotment of plot in my / our favour is binding of me / us. If a plot is allotted to me / us. I/We shall get the sale deed executed and registered at my / our own cost that is I/We shall bear the stamp duty, registration fees, VAT and all other fee payable to the govt. or other local bodies.

Authorized Signature

Date.....

Signature of the applicant (S)

Date.....

For Official Use Only

Application Receiving Date:

Client ID :

Name of Project :

Road No :

Block No :

Plot No :

Plot Size:

Face:

Rate per Katha Tk:

Total Fixed price Tk:

Booking Amount :

Down Payment :

Allotment/file No:

One Time :

Installment:

Installment Amount :

Accountant

Marketing Director

Development Director

MD/Chairman

File No.:

Ref. No.:



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Tel: 02-9512433, Mobile: 01915-618117

Money Receipt

Sl. No. Office Copy Date:.....

Received with thanks from Mr./Mrs./Miss:

On Account of reservation/installment against the Plot No..... Project

installment No..... Block No..... Road No.....

An amount of bd Taka in word:

Cash/Bank draft/Pay order/Cheque No..... Dated:

Of..... Bank..... Branch

Taka

This receipt is valid subject to the realization of the cheque

Received by Director Accounts Director Finance Managing Director / Chairman



DREAM HAVEN HOUSING LTD.

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Customer Copy

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Of..... Bank..... Branch

Taka

This receipt is valid subject to the realization of the cheque For: DREAM HAVEN HOUSING LTD.

Prepared by Director Accounts Director Finance Managing Director / Chairman

File No.:

Ref. No.:



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