

Application form

Reference Number

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Personal Information

Title: Surname:

First Name:

Other Names

Residential Address:

.....

.....

Phone Number(s):

Email Address: Date of Birth: / /

Nationality: Marital Status:

Occupation: Place of Work:

..... Address (Work/Office):

.....



Name of Referral:

Email: Phone No.:

- Means of Identification:** National ID Card International Passport Driver's License
 Perm. Voter's Card Identification No.

Next of Kin Information

Name of Next of Kin

Relationship: Phone Number:

Address:

Email:

Property Information Apartment Building (flats & Studios)/semi-detached Duplex/terrace Duplex/service Plots

Property Purchase Options (please indicate the number you wish to purchase in the box provided)

- | | | |
|--|---|------------------------------------|
| <input type="checkbox"/> Studio Apartment | <input type="checkbox"/> 1 Bedroom | <input type="checkbox"/> 2 Bedroom |
| <input type="checkbox"/> 3bedroom Semi Detach Duplex | <input type="checkbox"/> 4 Bedroom Terrace Duplex | |
| <input type="checkbox"/> Service Plot 300msq | <input type="checkbox"/> Service Plot 600msq | |

Payment Plan: (please indicate by ticking the appropriate box provided)

- | | |
|---|---|
| <input type="checkbox"/> Full Payment | <input type="checkbox"/> 18 Months Instalment |
| <input type="checkbox"/> 6 Months Instalment | <input type="checkbox"/> Mortgage |
| <input type="checkbox"/> 12 Months Instalment | |

Reason For Purchase (please indicate by ticking the appropriate box provided)

- | | |
|--|--|
| <input type="checkbox"/> Primary Residence | <input type="checkbox"/> Investment Property |
| <input type="checkbox"/> Retirement Home | <input type="checkbox"/> Others |
| <input type="checkbox"/> Second Home | |

Profession/industry (please indicate by ticking the appropriate box provided)

- | |
|---|
| <input type="checkbox"/> Organised Private Sector (formal Sector) |
| <input type="checkbox"/> Independent Business Owner (informal Sector) |

Declaration: I hereby declare that the information given in this application is correct. Any inaccurate or false information may invalidate my request.

Name Signature Date

All payments should be made in favour of
PWAN MAX PROPERTY & BUSINESS SOLUTIONS | ZENITH BANK 1017207325

For official use only

Reference No

Applicant's name:

Work Status: Paid employment Entrepreneur Both:

Mode of payment Cash Chq Others Deposit: (N) Balance: (N)

Approved Signatory Approved Signatory