

RICHMOND, ST. ANN APPLICATION FORM

FOR COMPLETION BY RICHMOND/ SALES AGENT:



LOT/APT #: COMMUNITY:.....

TYPE OF HOUSING UNIT

- HOUSE – The Palms
- TOWNHOUSE – Country Walk
- APARTMENT – Fern Court

OTHER OPTIONS:*

State: _____

*(not included in price of Housing Unit)

PART A – TO BE COMPLETED BY APPLICANT(S) * If more than two (2) Applicants complete additional Sheets A and B and attach.

PERSONAL INFORMATION

| APPLICANT A | | | APPLICANT B | | |
|---|------------|-----------------------------|---------------------------------|------------|-----------------------------|
| 1. Surname | First Name | Middle Name | Surname | First Name | Middle Name |
| <input type="checkbox"/> and/or nominee | | | | | |
| 2. Present Residential Address | | | Present Residential Address | | |
| Tel # | | | Tel # | | |
| 3. Mailing Address (if different) | | | Mailing Address (if different) | | |
| 4. ID Type & No. | | TRN # | ID Type & No. | | TRN # |
| 5. Marital Status | | Relationship to Applicant B | Marital Status | | Relationship to Applicant A |
| 6. Date of Birth d/m/y | | | Date of Birth d/m/y | | |
| 7. Purchaser's Attorney-at-Law | | | | | |
| Address | | | Tel # | | |
| Fax # | | | | | |

PART B – TO BE COMPLETED BY APPLICANT(S)

EMPLOYMENT

| | | | |
|---|-------------------|--------------------------------------|-------------------|
| 8. Occupation | | Occupation | |
| 9. Name of Business / Workplace | How Long? | Name of Business / Workplace | How Long? |
| 10. Address of Business / Workplace | | Address of Business / Workplace | |
| Tel # | | Tel # | |
| 11. Supervisor / Reference Name | | Supervisor / Reference Name | |
| Tel # | | Tel # | |
| 12. Gross Income Month/Annual | Additional Income | Gross Income Month/Annual | Additional Income |
| 13. Self Employed –Net Income Last Year | | Self Employed – Net Income Last Year | |

PART C – TO BE COMPLETED BY APPLICANT(S)

OTHER INFORMATION

| | |
|---|------------------------------------|
| 14. Proposed Method of Financing: | |
| <input type="checkbox"/> Cash | |
| <input type="checkbox"/> Mortgage | |
| Proposed Mortgage Company: | Proposed Loan Amount: |
| | |
| 15. How did you hear about Richmond? | |
| <input type="checkbox"/> Richmond Website/Internet: | Referral Agent, State: |
| <input type="checkbox"/> Real Estate Agent. State: | |
| <input type="checkbox"/> Advertisement: please specify | |
| <input type="checkbox"/> Other: please specify | |
| 16. Tick One | |
| <input type="checkbox"/> Joint Tenants - On the death of one owner the property will automatically go to the other owner(s) by operation of law an no joint tenant can dispose of his interest by a Will. | |
| <input type="checkbox"/> Tenants in Common - Each owner has an undivided share in the property and on death of one owner his Share would go as provided by his Will or according to the laws dealing with intestacy | |

We the undersigned Applicant(s) acknowledge, agree and confirms that the above information provided by us is true and accurate and is provided for use by Richmond Development Company Limited and Coolshade Estates Jamaica Limited in relation to the purchase of a lot, house or apartment in the Richmond Development and authorises that this information maybe shared with other third parties to enable those third parties to assist with providing the products and services associated with the Richmond Development.

We further agree(s) and irrevocably authorize and direct my/our employer(s) and banker(s) to confirm to Richmond Development Company Limited and/or Coolshade Estates Jamaica Limited the accuracy of the information given above, and to provide such information to both or either of them as may be required to satisfy themselves as to my/our ability to enter into agreements for any transaction relating to the Richmond Development.

.....
Signature of Applicant A

.....
Signature of Applicant B

.....
Date

.....
Date

.....
Witness

.....
Witness

PART D – TO BE COMPLETED BY INTERVIEWER (*PURCHASE PRICE MORE BE FILLED IN*)
DEPOSIT PAYMENTS & OPTIONS

| | | |
|--------------------------------------|---------|------------------------|
| Purchase Price: | | |
| Lot | \$..... | |
| Construction of House | \$..... | |
| Apartment | \$..... | Deposit Payment(s) \$ |
| | | \$ |
| Method of Payment : Cheque | | Other Options: \$_____ |
| Wire Confirmation Details | | |
| | Total | _____ |
| Signature of Interviewer/Sales Agent | | Date: |

Richmond Development Company Limited
19 Gloucester Avenue,
Montego Bay, St. James
Telephone (876) 979-3495 Fax (876) 971-9022 Site Office: (876) 610-8169

Coolshade Estates Company Limited
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Richmond's Attorneys-at-Law
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(Revised February 2010)