

BUYER'S INFORMATION SHEET



PRIME



SYNERGY

SUMMERSPRING
DEVELOPMENT CORP.



SPRINGTOWN
DEVELOPMENT CORP.

102 E. DE LOS SANTOS
REALTY CO., INC.



Metro South Davao
Property Corporation



The "Property"									
Company Name:		Block No.:		Lot No.:		Lot Floor Area:		House Floor Area:	
Project Name:		Unit No./Parking No./Phase/Building:		Unit Area:		Unit Type:		House Model:	
BUYER INFORMATION									
CO-OWNER DETAILS									
To be registered as: <input type="checkbox"/> Individual <input type="checkbox"/> Married to <input type="checkbox"/> Spouses <input type="checkbox"/> Minor									
Title:	First Name:		Middle Name:		Last Name:		Suffix:	Tax Identification Number:	
Name of Corporation/Partnership/Trust, as registered (If applicable):									
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth (MM/DD/YYYY):		Place of Birth:		Civil Status:		Citizenship (indicate both if dual citizenship):		Personal Email Address:
RESIDENCE (DO NOT ABBREVIATE)									
Present Address:	House/Unit No.:		Street, Subdivision:			Barangay:			
	City:		Province/State:			Country:		ZIP Code:	
Permanent Address:	House/Unit No.:		Street, Subdivision:			Barangay:			
	City:		Province/State:			Country:		ZIP Code:	
Permanent Address same as Present Address? <input type="checkbox"/> Yes <input type="checkbox"/> No			Telephone No. (Country Code – Area Code – Number):			Mobile No. (Country Code – Area Code – Number):			
Social Media Account for Contact Purposes (Choose One): <input type="checkbox"/> Facebook <input type="checkbox"/> Instagram <input type="checkbox"/> Whatsapp <input type="checkbox"/> Viber <input type="checkbox"/> WeChat <input type="checkbox"/> Telegram						Profile Name or Whatsapp/ Viber/ Wechat/ Telegram Number:			
EMPLOYMENT/BUSINESS INFORMATION									
<input type="checkbox"/> Private Sector <input type="checkbox"/> Government Sector <input type="checkbox"/> NGO, Charities, Foundations, other entity receiving donations									
Employer Name:			Type of Business Organization (for self-employed) <input type="checkbox"/> Single Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership			Type of Business Ownership (for self employed) <input type="checkbox"/> Franchisee <input type="checkbox"/> Licensee <input type="checkbox"/> Distributor/ Dealer <input type="checkbox"/> Regional Franchisor			
Business Name (for self-employed):									
Position:			Gross Monthly Income: <input type="checkbox"/> Under Php 49,000 <input type="checkbox"/> Php 50,000-99,999 <input type="checkbox"/> Php 100,000-149,999 <input type="checkbox"/> Php 150,000 or over						
Bldg./Unit No.:			Street, Subdivision:			Barangay:			
City:			Province/State:			Country:		ZIP Code:	
Work Email Address:			Telephone No. (Country Code – Area Code – Number):			Mobile No. (Country Code – Area Code – Number):			
INDUSTRY									
<input type="checkbox"/> Accounting	<input type="checkbox"/> Art Collection	<input type="checkbox"/> Construction, Design & Architecture	<input type="checkbox"/> Farming, Animals & Conservation	<input type="checkbox"/> Hospitality & Tourism	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Real Estate & Property	<input type="checkbox"/> Transport & Logistics		
<input type="checkbox"/> Administration & Office Support	<input type="checkbox"/> Banking & Financial Services	<input type="checkbox"/> Domestic Services	<input type="checkbox"/> Food	<input type="checkbox"/> Human Resources & Recruitment	<input type="checkbox"/> Marketing & Communications	<input type="checkbox"/> Retail & Consumer Products	<input type="checkbox"/> Trades & Services		
<input type="checkbox"/> Aviation	<input type="checkbox"/> Call Centre & Customer Service	<input type="checkbox"/> Education & Training	<input type="checkbox"/> Government & Defense	<input type="checkbox"/> Information Technology	<input type="checkbox"/> Maritime	<input type="checkbox"/> Science & Technology	<input type="checkbox"/> Weapons and Metals Trading		
<input type="checkbox"/> Advertising, Arts & Media	<input type="checkbox"/> Community Services & Development	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Healthcare	<input type="checkbox"/> Legal	<input type="checkbox"/> Mining, Resources & Energy	<input type="checkbox"/> Sport & Recreation			
SPOUSE DETAILS									
Title:	First Name:		Middle Name:		Last Name:		Suffix:	Tax Identification Number:	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth (MM/DD/YYYY):		Place of Birth:		Civil Status:		Citizenship (indicate both if dual citizenship):		Personal Email Address:
RESIDENCE (DO NOT ABBREVIATE)									
House/Unit No.:			Street, Subdivision:			Barangay:			
City:			Province/State:			Country:		ZIP Code:	
Telephone No. (Country Code – Area Code – Number):					Mobile No. (Country Code – Area Code – Number):				

Social Media Account for Contact Purposes (Choose One): <div><input type="checkbox"/> Facebook <input type="checkbox"/> Instagram <input type="checkbox"/> Whatsapp <input type="checkbox"/> Viber <input type="checkbox"/> WeChat <input type="checkbox"/> Telegram</div>					Profile Name or Whatsapp/ Viber/ Wechat/ Telegram Number:	
EMPLOYMENT/BUSINESS INFORMATION						
<div><input type="checkbox"/> Private Sector <input type="checkbox"/> Government Sector <input type="checkbox"/> NGO, Charities, Foundations, other entity receiving donations</div>						
Employer Name:		Type of Business Organization (for self-employed) <div><input type="checkbox"/> Single Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership</div>			Type of Business Ownership (for self employed) <div><input type="checkbox"/> Franchisee <input type="checkbox"/> Licensee <input type="checkbox"/> Distributor/ Dealer <input type="checkbox"/> Regional Franchisor</div>	
Business Name (for self-employed):						
Position:		Gross Monthly Income: <div><input type="checkbox"/> Under Php 49,000 <input type="checkbox"/> Php 50,000-99,999 <input type="checkbox"/> Php 100,000-149,999 <input type="checkbox"/> Php 150,000 or over</div>				
Bldg./Unit No.:		Street, Subdivision:			Barangay:	
City:		Province/State:			Country:	ZIP Code:
Work Email Address:		Telephone No. (Country Code – Area Code – Number):			Mobile No. (Country Code – Area Code – Number):	
INDUSTRY						
<div><div><input type="checkbox"/> Accounting</div><div><input type="checkbox"/> Art Collection</div><div><input type="checkbox"/> Construction, Design & Architecture</div><div><input type="checkbox"/> Farming, Animals & Conservation</div><div><input type="checkbox"/> Hospitality & Tourism</div><div><input type="checkbox"/> Manufacturing</div><div><input type="checkbox"/> Real Estate & Property</div><div><input type="checkbox"/> Transport & Logistics</div><div><input type="checkbox"/> Administration & Office Support</div><div><input type="checkbox"/> Banking & Financial Services</div><div><input type="checkbox"/> Domestic Services</div><div><input type="checkbox"/> Food</div><div><input type="checkbox"/> Human Resources & Recruitment</div><div><input type="checkbox"/> Marketing & Communications</div><div><input type="checkbox"/> Retail & Consumer Products</div><div><input type="checkbox"/> Trades & Services</div><div><input type="checkbox"/> Aviation</div><div><input type="checkbox"/> Call Centre & Customer Service</div><div><input type="checkbox"/> Education & Training</div><div><input type="checkbox"/> Government & Defense</div><div><input type="checkbox"/> Information Technology</div><div><input type="checkbox"/> Maritime</div><div><input type="checkbox"/> Science & Technology</div><div><input type="checkbox"/> Weapons and Metals Trading</div><div><input type="checkbox"/> Advertising, Arts & Media</div><div><input type="checkbox"/> Community Services & Development</div><div><input type="checkbox"/> Entertainment</div><div><input type="checkbox"/> Healthcare</div><div><input type="checkbox"/> Legal</div><div><input type="checkbox"/> Mining, Resources & Energy</div><div><input type="checkbox"/> Sport & Recreation</div></div>						
<div><input type="checkbox"/> ATTORNEY-IN-FACT (SPECIAL POWER OF ATTORNEY [SPA] REQUIRED) <input type="checkbox"/> GUARDIAN DETAILS (FOR MINOR) <input type="checkbox"/> TRUST ACCOUNT</div>						
AIF to sign in behalf of						
Title:	First Name:		Middle Name:	Last Name:		Suffix: Tax Identification Number:
Gender: <div><input type="checkbox"/> Male <input type="checkbox"/> Female</div>	Date of Birth (MM/DD/YYYY):		Civil Status:	Citizenship (indicate both if dual citizenship):		Personal Email Address:
RESIDENCE (DO NOT ABBREVIATE)						
Mailing Address:	House/Unit No.:		Street, Subdivision:		Barangay:	
	City:		Province/State:		Country:	ZIP Code:
Telephone No. (Country Code – Area Code – Number):				Mobile No. (Country Code – Area Code – Number):		
Social Media Account for Contact Purposes (Choose One): <div><input type="checkbox"/> Facebook <input type="checkbox"/> Instagram <input type="checkbox"/> Whatsapp <input type="checkbox"/> Viber <input type="checkbox"/> WeChat <input type="checkbox"/> Telegram</div>					Profile Name or Whatsapp/ Viber/ Wechat/ Telegram Number:	
DISCLOSURE						
<div>Are you presently holding any of the following positions?<div><input type="checkbox"/> YES <input type="checkbox"/> NO</div><div>If "YES", please check applicable position below. Additional buyer information and document/s maybe required.<div><div><div><input type="radio"/> National / Local Government Official</div><div><input type="radio"/> Appointed Executive Official</div><div><input type="radio"/> Chairman, Commissioner, or Member of any Constitutional Commission</div><div><input type="radio"/> Head or CEO of a Government-Owned or Controlled Corporation</div></div><div><div><input type="radio"/> Judicial Official</div><div><input type="radio"/> Leader or Officer of a Major National Political Party</div><div><input type="radio"/> Head of a Foreign State</div></div></div></div></div>						

I signify my conformity to the foregoing and certify that all information provided above are true and correct.

BUYER/S & AUTHORIZED SIGNATORIES (If applicable)			
SIGNATURE OVER PRINTED NAME			
SELLERS			
SALES ASSOCIATE	IMP	LOCAL BROKER	IPS/PS
SELLERS			
BROKER LIAISON OFFICER	ASST. SALES DIRECTOR	SALES DIRECTOR	