



CLIENT'S SUBSCRIPTION FORM

TITLE: _____ GENDER: _____ DATE OF BIRTH: _____

SURNAME: _____ FIRST NAME: _____

OTHER NAMES: _____ MARITAL STATUS: _____

CONTACT ADDRESS: _____ Email _____

PHONE NO: _____ OCCUPATION: _____

REFERRED BY: _____ PHONE NO: _____

Nos of Plots _____ Amount(N) _____

NEXT OF KIN

SURNAME: _____ OTHER NAMES: _____

CONTACT ADDRESS: _____

PHONE NO: _____ RELATIONSHIP: _____

PAYMENT PLAN

OUTRIGHT PAYMENT: _____ 6 MONTHS PAYMENT: _____ 9 MONTHS PAYMENT: _____

12 MONTHS PAYMENT: _____ 18 MONTHS PAYMENT: _____ 18 MONTHS PAYMENT: _____

UNIT PRICE: _____ TOTAL AMOUNT PAYABLE: _____

TERMS AND CONDITIONS APPLY

I _____ hereby affirm the information provided in this document as a client of LOLA & CLOVER PROPERTIES LTD is true and I consent to the terms and condition.
Signature: _____

Kindly fill and submit to our office or email below. Thank you.

