



VVR Housing Pvt Ltd

Shape of your Dreams

AN ISO 9001:2000 CERTIFIED COMPANY

REQUISITION FOR REGISTRATION OF PLOT

1. Name of Venture : _____
2. Pass Book No. : _____
3. Date of Joining : _____
4. Name of the Customer : _____
5. Age : _____
6. Occupation : _____
7. Father's / Husband's Name : _____
8. Address : _____

9. Plot No : _____
10. Sq.Yds. : _____
11. Rate per Sq. Yd. : _____
12. Sy.No. : _____
13. Name of the person of whom
This plot is to be registered : _____
14. Age : _____
15. Occupation : _____
16. Father's / Husband's Name : _____
17. Address : _____

18. Any other Information : _____

Witness

Date:

Signature of the Customer

Place:

BRACH MANAGER

REGISTRATION INCHARGE