

APPLICATION FOR PURCHASE OF PROPERTY

THIS FORM IS TO BE COMPLETED BY PROSPECTIVE PURCHASERS OF PROPERTY ON OFFER BY THE URBAN DEVELOPMENT CORPORATION.

PLEASE READ THE RULES AND CONDITIONS CAREFULLY AND PRINT CLEARLY. INCOMPLETE OR UNSIGNED APPLICATIONS WILL NOT BE CONSIDERED.

NAM	E OF PROPERTY:		LO	T (S) #:						
Α.	_PERSONAL INFORMATION (CONTACT PER	SON/INSERT NAME	OF COMPANY/ORGAN	IIZATION IF AP	PLYING AS SUCH)					
1)	SURNAME	2) FIRST NAM	ΛE	3)	MIDDLE NAME (S)					
4)	NAME OF ORGANISATION			<u> </u>						
5)	HAVE YOU HAD A NAME CHANGE BY MARRIAGE OR DEED POLL?	6) IF YES, STA	TE PREVIOUS NAME(S)	7)	DATE OF BIRTH					
	□ YES □ NO				 (dd/mm/yyyy)					
8)	HOME ADDRESS:		9) MAIL	ING ADDRESS:	(ии/ппп/уууу)					
	Street		Stree	et						
	Area / Town									
	Parish		Parisi							
10)	PERSONAL CONTACT INFORMATION		•							
	Cell Phone Number		Home Number							
	Work Number		E-mail address:							
В.	COMPANY INFORMATION									
11)	DO YOU CURRENTLY OPERATE A BUSINESS	5?								
	□ YES □ NO									
12)	IF THE ANSWER TO QUESTION 11 IS YES									
	a) WHAT IS THE TRADE NAME OF THE BUSINESS?									
	b) WHAT IS THE REGISTERED NAME OF THE COMPANY?									
	c) WHAT IS THE DATE OF REGISTRATION? (Please provide a copy of the Certificate of Registration)									

13)	ADDRESS OF BUSINESS	14) MAILING ADDRESS OF BUSINESS							
	Street	Street							
	Area / Town	Area / Town							
	Parish	Parish							
15)	COMPANY CONTACT INFORMATION								
	Cell Phone Number	Landline Number							
	Fax Number	E-mail address:							
C.	c. OPERATING INFORMATION								
16)	16) GIVE A BRIEF DESCRIPTION OF THE TYPE OF BUSINESS YOU WISH TO OPERATE								
17)	HOW MANY YEARS OF EXPERIENCE DO YOU HAVE IN THE PROPOSED BUSINESS?	18) WHAT SIZE (SQ. FT) SPACE DO YOU REQUIRE?							
19)	HOW SOON CAN OPERATIONS COMMENCE?	20) HOW MANY PERSONS ARE TO BE EMPLOYED?							
21)	1) ANY OTHER PERTINENT INFORMATION								
D.	a) TAX REGISTRATION NUMBER (TRN) (Personal)	23) ONE OF THE FOLLOWING MUST ALSO BE PROVIDED							
22)	a) TAX REGISTRATION NOWIGER (TRIN) (Personal)	a) Passport							
	b) TAX REGISTRATION NUMBER (TRN) (Company)	b) National I. D.							
		c) Driver's License							
		d) Other (please specify)							
E.	FINANCIAL INFORMATION								
24)	LIST CREDIT REFERENCES, GIVING NAMES ADDRESSES & CONTACT NUI	MBERS							
		ddress <u>Contact Numbers</u>							
a) _	a)	a)							
b) _	b)	b)							
c)	c)								



		c)							
25)	METHOD OF PAYMENT	26) DETAILS OF PAYMENT							
	☐ CHEQUE (provide cheque number)	a) BID PRICE							
		b) DEPOSIT AMOUNT							
	☐ BANK TRANSFER (provide transfer number)								
	☐ MORTGAGE (state name, address, and contact number for mortgage provider)								
	a) NAME								
	b) ADDRESS								
	c) CONTACT NUMBER								
	C) CONTACT NOWIDEN								
27)	DO YOU BANK WITH ANY OTHER FINANCIAL INSTITUTION?	□ YES □ NO							
	If Yes:								
	NAME	ADDRESS							
28)	HAVE YOU EVER BEEN INSOLVENT, BANKRUPT OR MADE OR BEEN INVOLVED IN ANY COURT PROCEEDINGS FOR DEBT?	29) IF THE ANSWER TO QUESTION 28 is YES, PLEASE EXPLAIN.							
	□ YES □ NO								
_	OTHER INCORMATION								
F.	OTHER INFORMATION PROVIDE DETAILS OF THE PROPOSED USE								
30)	PROVIDE DETAILS OF THE PROPOSED USE								
31)	PROVIDE DETAILS OF ANY OTHER INFORMATION TO SUPPORT THE	APPLICATION (OPTIONAL)							
G. ATTACHMENTS									
		to be processed. If all this information is not submitted, your							
The following will need to be lodged with your application for it to be processed. If all this information is not submitted, your application will be returned or refused. Tick the box to confirm the attachments for part of the application:									
	25% DEPOSIT VIA MANAGER'S CHEQUE OR BANKER'S GUARAI CORV OF TAX DESISTRATION NUMBER (TRN)/TAX COMPLIANCE								
	 □ COPY OF TAX REGISTRATION NUMBER (TRN)/TAX COMPLIANCE CERTIFICATE (TCC) □ COPY OF VALID FORM OF IDENTIFICATION 								



☐ EVIDENCE OF FINANCIAL STANDING, CONFIRMING SUFFICIENT LIQU	JIDITY TO SUPPORT THE OFFER. ¹
H. DECLARATION	
THE INFORMATION PROVIDED HEREIN IS FACTUAL AND IS TO COMPLETE. I HEREBY ACKNOWLEDGE THAT ANY FALSIFICATION RESULT IN MY DISQUALIFICATION FROM THE APPLICATION CONSIDERED AS NUGATORY.	ON OF THE INFORMATION PROVIDED HEREIN WILL
NAME OF APPLICANT	POSITION OF APPLICANT
SIGNATURE OF APPLICANT	DATE (dd/mm/yyyy)
FOR INTERNA	AL USE:
DATE RECEIVED:	
COMMENTS:	
APPROV	'ED
NAME: S	IGNATURE:
DATE:(dd/mm/yyyy)	

Bank statement confirming sufficient liquidity to support the proposal.

Letter of Intent from a reputable financial institution confirming sufficient liquidity to support the proposal.



 $^{^{\}rm 1}\,\mbox{Examples}$ of documents that can be submitted include but are not limited to:

Two (2) years of most recent Audited Financial statements notarised by a qualified accountant confirming sufficient liquidity to support the proposal.

Two (2) years of most recent Unaudited Financial statements notarised by a qualified accountant confirming sufficient liquidity to support the proposal.

MONETARY OFFER FORM

To: Urban Development Corporation

12 Ocean Boulevard,

Kingston

RE: Request for Offers to Purchase - Land Part of Caymanas Estate, Ferry Pen St. Catherine

Dear :	Sirs:												
Our o	offer to	the L	Jrban	Develo	opmen	t Corp	oratio	n to pui	chase	Land Po	art of C	ayma	nas Estate,
_					_								number(s)
						_ and	area	of _					square
metre	es												is:
													<u></u>
								<u> </u>					
We ur	ndersta	nd yo	u are	not bo	und to	о ассер	t any	Offer yo	u receiv	æ.			
		.1											
Yours	sincere	ely,											
Autho	orized S	ignatı	ure [<i>l</i>	n full a	nd init	ials]:							
Name	and Ti	tle of	Signa	tory:									
IVallic	. ana m	tic oi	Jigin										
Name	of Con	npany	/:										
Δddre	, ,												
, laar c	.55							· · · · · · · · · · · · · · · · · · ·					
Fmail	:												
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Conta	ict Num	ber: _											
Tax Re	egistrat	ion N	umbe	r (TRN)/TCC·								
·un ill	-0.56.46	.5.111	311100	(,,								
Date:													
		(dd/	/mm/y	ууу)									

