

Hastha Global Ventures

# PROPERTY DETAILS



Please fill all the details in CAPITAL LETTERS and BLACK INK only, All fields are mandatory, unless mentioned as optional – (opt).  
I WISH TO SUBSCRIBE TO THE FOLLOWING MEMBERSHIP PACKAGE (select the preferred box)

Date : \_\_/\_\_/\_\_

Name of the Owner: Mr. ☐ Ms. ☐ Dr. ☐

Mobile number :

Address of the Property:

Landline number :

Email id :

Type of property: ☐ Apartment ☐ Villa ☐ Plot ☐ Independent house ☐ Commercial property

Location & Landmark of the property:  Project name (if applicable):

Area in Sq. ft :  No.of Bathrooms :  No.of Bedrooms :  No.of Balconies :

Pooja room :  Study room :

Main door facing : ☐ North ☐ South ☐ East ☐ West No. of car parks :  ☐ Furnished ☐ Semi furnished

Property located on which floor :  Total No. of Floors :  Type of flooring :

Age of Building (In Years) :  Keys available with :

Other tasks / requirements to be followed by Hastha Global Ventures

Signature  
Manager  
Hastha Global Ventures

Signature of the Client / Owner