



Affix your Passport Photograph Here

DIVANO CRYSTAL LIMITED CLIENT SUBSCRIPTION FORM

Please complete the subscription form below to be registered as a client of Divano Crystal Limited

* FILL ALL INFORMATION IN BLOCK LETTERS

*Title *Surname

*First name *Other names

*Sex Male Female *Date of Birth *Marital Status

*Contact Address

*Email *Moblie

*Occupation/profession

*Referred by *Moblie

NEXT OF KIN

*Surname *Other name

*Residential Address

*Contact Number(s) *Relationship

PAYMENT

Number of Plots Out Right Payment

Unit Price Payment in 3 Month Terms and condition apply on 3 and 6 months payment

Total Amount Payment in 6 Month

I _____ hereby affirm that the information provided in this document as a client of **DIVANO CRYSTAL LTD** is true and that the estate shall deduct 20% of total payment made in case I decline subscription.



Bank Detail:



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

info@divanocrystal.com
www.divanocrystal.com
divano_crystal01

0808 633 2450, 0706 626 0317
18, Floodgate Street, Avera Atlantic
Vesta Estate, Olokunla, Lagos.



ACKNOWLEDGMENT AND UNDERTAKING

I/We..... a subscriber of the Estate, do hereby acknowledge my obligations.

I/We also acknowledge the right of Divano Crystal Ltd developer of the estate to deduct **20%** of total payment made in case we decline subscription.

Subscriber(s) signature..... Date.....

PROPERTY OPTION

INDICATE PROPERTY TYPE AND NUMBER OF UNITS:

.....
.....

FOR OFFICE USE ONLY

DCL CODE.....




BUSINESS DEVELOPMENT OFFICER.....



ACCOUNTS OFFICER.....

DATE.....

Note: Extra Payment applies to subscribers that default within the scheduled plan of payment.

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

 info@divanocrystal.com
 www.divanocrystal.com
 [divano_crystal01](https://www.instagram.com/divano_crystal01)

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