



CUSTOMER REGISTRATION FORM

Date: _____

Ref. No. _____

CLIENT PERSONAL DATA			
Name		Birthdate (mm/dd/yyyy)	
Address			
Tel. Number	Fax Number	Mobile Number	Email Address
Nationality : _____ Civil Status: _____ Occupation: _____			

I acknowledge that (Name of Seller) _____, authorized seller of Citrineland Corporation, has given me a comprehensive presentation of the project _____.

I hereby authorize him/her as my seller of choice for the next 30 days. No other seller should be recognized as/or credited by Citrineland Corporation should I decide to make reservation deposit for the above-mentioned project for a period of 30 calendar days from signing of this Client Registration Form.

To be filled out by the Seller			
Seller Channel (please specify Group & Name):		Prospect Source:	
___ Broker	___ Direct/Walk-in	___ Project Site	___ Phone
___ Property Advisor	___ Others _____	___ Event/Exhibit	___ Website
Source of Awareness:			
___ Newspaper	___ Referral	___ Radio	___ Flyers / Brochures
___ Website	___ Social Media	___ Billboard	___ Others _____

Authorized by:

 CLIENT (Name & Signature) Date

CONFORME:

 BROKER/AGENT (Name & Signature) Date

 REALTY NAME

NOTE: This form must be received by the Sales & Marketing Office within 48 hours from the date indicated above. Otherwise it will be automatically nullified.