

H No: 8-3-319/34, 2nd floor, Sri Sai Saradhinagar, Behind Saradhi Studio, Yellareddyguda, Ameerpet, Hyderabad-73: Phone 040 2375 0909 Website: www.mahimanvithainfra.com e-mail: info@mahimavitha.com

Application For Registration Name in Block Letters: Father/Husband/Guardian Name Age :..... Occupation: Address: Mobile/Phone No :.....Email id FOR OFFICE USE ONLY Sq.Yd.s Plot No: Venture: Area: **Boundaries:** North:___ South:_ East :_ West :___

PHOTOGRAPH AND FINGERPRINTS AS PER SECTION 32 A OF REGISTRATION ACT. 1908

SI. No.	Finger Prints in Black Ink (LEFT THUMB)	PASSPORT SIZE PHOTOGRAPH (Black & White)	NAME AND PERMANENT POSTAL ADDRESS OF Presentant/Sellers/Buyers
		Passport Size Photo	

SIGNATURE OF WITNESS:-

1.

2. SIGN. OF THE EXECUTANT/S

NOTE: if the Buyer (s) is/are not present before the Sub-Regester, the following request should be signed. I/We send here with my / our photograph/ (s) and fingerprints in the form prescribed, through my / our representative, Sir ______ as I/We cannot apper personally before the Registering Officer in the Office of Sub-Register of Assurances

SIGNATURE OF THE REPRESENTATIVE.

SIGNATURE (S) OF BUYERS