



**ASAS International Development, Inc.**  
 Purok 4, Brgy. Sto. Niño, Butuan City  
 Contact No: 09171669442 / 09173275772



## BUYER'S INFORMATION SHEET

Kindly fill-out all fields and indicate "NA" to fields not applicable.

PROJECT:		LOCATION:		OWNER:		TYPE OF PROPERTY:	
LOT AREA:		PRICE PER SQM:		TOTAL CONTRACT PRICE:		LOT / UNIT DETAILS: P - B - L -	
PAYMENT TERM:		<input type="checkbox"/> STANDARD <input type="checkbox"/> PROMO		PROMO NAME:			
HOW DID YOU LEARN ABOUT US:		<input type="checkbox"/> FAMILY <input type="checkbox"/> FRIENDS <input type="checkbox"/> FACEBOOK <input type="checkbox"/> WEBSITE <input type="checkbox"/> WOM (WORD OF MOUTH)		<input type="checkbox"/> EXHIBIT <input type="checkbox"/> REFERRAL <input type="checkbox"/> SATURATION <input type="checkbox"/> WALK-IN <input type="checkbox"/> INFORMATION BOOTH			
PURPOSE OF PURCHASE:		<input type="checkbox"/> PRIMARY RESIDENCE <input type="checkbox"/> SECONDARY RESIDENCE <input type="checkbox"/> TERTIARY RESIDENCE		<input type="checkbox"/> INVESTMENT <input type="checkbox"/> OTHERS, SPECIFY			
THE BUYER DESIRES THE PURCHASE TO BE REGISTERED AS:		<input type="checkbox"/> SOLE <input type="checkbox"/> SPOUSES <input type="checkbox"/> CORPORATION <input type="checkbox"/> PARTNERSHIP					
<b>PRINCIPAL BUYER'S INFORMATION</b>							
FIRST NAME: * Required		MIDDLE NAME: * Required		LAST NAME: * Required			
DATE OF BIRTH: * Required		SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		CIVIL STATUS: * Required		<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWER/WIDOW	
TAX IDENTIFICATION NO.: * Required		CITIZENSHIP: * Required		RELIGION: * Required			
PASSPORT NO. / PLACE / DATE ISSUED / EXPIRATION DATE: * Required							
GOVT. ISSUED ID NO., ID NAME (TIN NUMBER/ DRIVER'S LICENSE/ SSS/GSIS, etc.): * Required							
PERMANENT RESIDENCE ADDRESS IN THE PHILIPPINES: * Required							
PROVINCIAL ADDRESS:							
OWNERSHIP OF CURRENT RESIDENCE:		<input type="checkbox"/> OWNED <input type="checkbox"/> RENTED <input type="checkbox"/> LIVING WITH RELATIVES <input type="checkbox"/> MORTGAGED		YEARS OF RESIDENCY:			
RESIDENCE TELEPHONE NO.: * Required		MOBILE NO.: * Required		PERSONAL E-MAIL ADDRESS: * Required			
EMPLOYMENT TYPE (Primary Source of Income): * Required		<input type="checkbox"/> PROPRIETOR <input type="checkbox"/> LOCALLY EMPLOYED <input type="checkbox"/> OVERSEAS CONTRACT WORKER		BUSINESS / EMPLOYER'S NAME:			
OFFICE ADDRESS:							
INDUSTRY: * Required		RANK / POSITION:		YEARS IN SERVICE:			
OFFICE TELEPHONE NO.:		OFFICE FAX NO.:		OFFICE E-MAIL ADDRESS:		GROSS MONTHLY INCOME:	
<b>SPOUSE / CO-BUYER'S INFORMATION</b>							
FIRST NAME: * Required		MIDDLE NAME: * Required		LAST NAME: * Required			
RELATIONSHIP TO BUYER: * Required							
DATE OF BIRTH: * Required		SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE		CIVIL STATUS: * Required		<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWER/WIDOW	
TAX IDENTIFICATION NO.: * Required		CITIZENSHIP: * Required		RELIGION: * Required			
PASSPORT NO. / PLACE / DATE ISSUED / EXPIRATION DATE: * Required							
GOVT. ISSUED ID NO., ID NAME (TIN NUMBER/ DRIVER'S LICENSE/ SSS/GSIS, etc.): * Required							
PERMANENT RESIDENCE ADDRESS IN THE PHILIPPINES: * Required							
PROVINCIAL ADDRESS:							
RESIDENCE TELEPHONE NO.: * Required		MOBILE NO.: * Required		PERSONAL E-MAIL ADDRESS: * Required			
EMPLOYMENT TYPE (Primary Source of Income): * Required		<input type="checkbox"/> PROPRIETOR <input type="checkbox"/> LOCALLY EMPLOYED <input type="checkbox"/> OVERSEAS CONTRACT WORKER		BUSINESS / EMPLOYER'S NAME:			
OFFICE ADDRESS:							
OFFICE TELEPHONE NO.:		OFFICE FAX NO.:		OFFICE E-MAIL ADDRESS:		GROSS MONTHLY INCOME:	
<b>ATTORNEY-IN-FACT (for buyers abroad) Please attach notarized Special Power of Attorney (SPA)</b>							
FIRST NAME:		MIDDLE NAME:		LAST NAME:			
RESIDENCE TELEPHONE NO.:		MOBILE NO.:		PERSONAL E-MAIL ADDRESS:			
SPA's POSTAL / MAILING ADDRESS:							
TAX IDENTIFICATION NO.:		CITIZENSHIP:		SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE			
DATE OF BIRTH:		RELATIONSHIP TO BUYER:		CIVIL STATUS:		<input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWER/WIDOW	

I/We hereby certify that all information indicated in the Buyer's Information Sheet are valid, true, correct, and complete and that the signature/s appearing herein belong/s to me/us and is/are genuine and binding upon me/us.

I/We hereby authorize **ASAS International Development, Inc.** and its internal and external representatives to obtain any information from and/or conduct independent verification of information provided by me/us in connection with this purchase with other institution/third person. I/We expressly consent to the disclosure of such institution/third person to **ASAS International Development, Inc.** representative of any such information and I/We hereby expressly waive any and all of my/our rights under applicable laws relative to the confidentiality of such information.

I/We understand that the approval of this purchase is solely discretionary upon **ASAS International Development, Inc.** and that non disclosure/falsification of information as herein required shall be sufficient ground for disapproval of my/our purchase and/or privileges.

I agree to **ASAS** Privacy Policy and give my full consent to collect necessary data from me to process my transaction with the company.

\_\_\_\_\_  
 PRINCIPAL BUYER  
 (Signature Over Printed Name)

\_\_\_\_\_  
 SPOUSE / CO-OWNER  
 (Signature Over Printed Name)

\_\_\_\_\_  
 ATTORNEY IN FACT  
 (Signature Over Printed Name)

\_\_\_\_\_  
 DATE