

Apartment for Government Employees & Professionals in the Government & Private Sector



House Reservation Application Form

Weera Mawatha, Pannipitiya

Director, Middle Income Housing Project,
Urban Development Authority,

6th Floor,

Sethsiripaya,

Battaramulla.

Ministry of Megapolis & Western Development





Urban Development Authority Reference:

CHECKLIST	
1. Fully Completed Application Form	
2. Copies of national identity card(Applicant & Spouse)	
3. Proof of Present Address (Current Utility Bills-Water & Electricity	
Bill, Grama Niladhari Certificate, Deed or Rent Agreement)	
4. Original Salary particulars (Appendix 1) 4 Recent Pay slips	_
5. Signed Customer Declarations	L
6. Original Bank Statements (6 Months)	L

	Application received No			
	Received Date	Re	ceived Time	
1	1. Personal Details			
I.	Full Name:	TALAN	<u> </u>	
	EST	01.11.2021		
II.	Name with Initials:			
III.	NIC No:			
IV.	Date of Birth			listl
V.	Gender: Female		Male	
VI.	Permanent address:		••••	
/II.	Postal address:			
III.	Telephone: Office:			
	Home			
	Mobile	e:	997	
		L		
IX.	E-mail:	your dreams, o		
X.	E-mail: Preferred Housing unit &	Type A	Type B	Type C
		Type A 750sqft	Type B 950sqft	Type C 1050sqft
	Preferred Housing unit & price	OFER		

^{*}This price will be changed based on the actual floor area & floor level.

XI.	Marital status: If Married,	Married		Single	
XII.	Spouse Full Nan	ne:			
XIII.	Name with Initia	ıls:			
XIV.	NIC No:				
XV.	Date of Birth				
XVI.	Telephone:	Office:			
		Home:	1.11.202	1	
		Mobile			
XVII.	Postal Address:.				
XVIII.	E-mail:				
2	. Paymentoptior	1			
•	Initial Payment	: 25% of dov	vn payment s	should be p	oaid within two month
	period (Rs.1 M	for the reser	rvation fees	need to pa	ny as a part of down
	payment at the	time of housi	ng unit reser	vation)	
•	Balance paymen	t in installmen	ts through m	ortgage arra	ngement.
3	Employment	otoilo	11 010	6	
	. Employment D	elalis			
-	I. Occupation:-				
Ι	I. Name of Emp	oloyer:			

III.	Service period:	Years	Months
IV.	Previous Organizations (If any),		
	Name of Employ	yer:	
	Occupation:		
	Service Period:	Years	Months
V.	Total service per	riod of the (Private	e/Government) Organization:
	Years		Months
4. Inco	me Details		375
	3	377	ZZ
			Amount per Month
I.	Gross basic wag	e/salary	
II.	Overtime:		
III.	Allowances:		
IV.	Commission:		Pl
V.	Other income*:		
v .	Total Income:		E
*Plea	se give details of	other income: (At	tached Billing Proof)

5. This Section to Be Completed by an Authorized Officer in charge in the Organization

record.	re true and correct according to the service
Name:	
Position:	AL AM
Name of the institution:	01 11 2021
Address:	
Tel Number:	
Date:	Signature
(Should be Director General / C	General Manager or Director HRM)
Signature of the Applicant:	

The information given will be treated in the strictly confidence

Note:

- i. One housing unit will be allocated for one family.
- ii. Dully filled application form together with other documents should be handed over to Director (Middle Income Housing Project), Urban Development Authority, 6th Floor, Sethsiripaya, Bttaramulla with the payment of Rs.1000.00 non-refundable deposit.