



Choice Group

PROPERTY LISTING FORM - SALE

NAME OF OWNER: (1) _____

JOINT OWNER: (2) _____

UNIT NO: _____ **FLOOR:** _____ **AREA (SQ.FT):** _____

NO. OF BEDROOMS: _____ **BATHROOMS:** _____ **MAIDS:** _____

LOCATION: _____ **VIEW:** _____

BUILDING: _____ **PROJECT:** _____

MASTER DEVELOPMENT: _____

COMPLETION DATE: _____

ORIGINAL PRICE (AED): _____

MINIMUM SELLING PRICE (AED): _____

FEE PAYABLE TO US: _____

I hereby agree to allow Choice Real Estate Consultancy to offer the above property for Sale at the Minimum Selling Price stated above.

Furthermore, I agree to pay Choice Real Estate Consultancy, the fee stated above immediately upon completion of the transaction.

I undertake to inform Choice Real Estate Consultancy immediately in writing, in the event that I wish to withdraw my property from your listings or if there is a change in the minimum selling price stated above.

SIGNATURE OF OWNER: _____

NAME OF THE SIGNATORY: _____

DATE: _____

PLEASE FAX TO CHOICE GROUP ON +971-4-331 6704 OR SCAN AND SEND THE FORM TO info@choicegroup.info