

ACF-2023-FRM-023 _ V1.2

APPLICATION FOR PAYMENT REVISION

ފަދަ ދަރިވަރުގެ ފަރާތުން ދަރިވަރުގެ ފަރާތުން ދަރިވަރުގެ ފަރާތުން ދަރިވަރުގެ ފަރާތުން ދަރިވަރުގެ ފަރާތުން

Housing Development Corporation Limited
HDC Building, Hulhumalé, Republic of Maldives
Hotline 1516 T +960 335 3535
E hello@hdc.mv W www.hdc.mv

Applicant's Details

Form fields for Applicant's Details including NID Number, Applicant's Name, Permanent Address, Current Address, and Contacts/email.

Property Details

Form fields for Property Details including Type of property (Rowhouse, Plot, Flat), Agreement Number, and Property Number.

Declaration

I (NID Number:), Declare that the above information provided here is true and accurate. I hereby assent to the changes brought by Housing Development Corporation Ltd to the current payment policy with reference to the Agreement Number: I acknowledge to have understood the terms fully upon submission of this form, I agree to sign the Addendum that will be part of the said Agreement.

Signature line for the applicant with a dotted line for the signature.

Date Signature Name

For office use

Form fields for office use including Date, Signature, and Received by.

Note: Please submit ID card copy along with the form.