

Member Signature

ABM Infocity OWNERS WELFARE ASSOCIATION ® (ABMIOWA) No. 389, Ward No. 2, Kallugoppanahalli Village, Bidadi, Ramanagara Tq. Karnataka. Web: www.abminfocity.in Email: info@ambinfocity.in / abmiowa2021@gmail.com

Authorised Signatory

(Reg, No. DRRM/SOR/95/2021-2022)

	ME	MBERSHI	P FORM		
Application No.: ABMIOWA /					Passport Photo
Rs. 1000/- Life Member Date:					
Name					
Father/Husband Name					
Address					
ID PROOF	Aadhar Card	Voter Id	PAN DL	others	
Site No					
Site Sq.ft					
No of Plots			Total Sq.ft.		
Date of Birth:			Age	Gende	r: M F
Contact Number	1.		2.		
Email	Profession				
Mode of Payment	Cash Cheque* D.D. UPI NEFT RTGS				
Member Signature		For I	ABM Infocity Ow		ssociation (R) sed Signatory
ABM Infocity Owners Welfare Association MEMBERS COPY ABM Infocity OWNERS WELFARE ASSOCIATION ® (ABMIOWA) No. 389, Ward No. 2, Kallugoppanahalli Village, Bidadi, Ramanagara Tq. Karnataka. (Reg. No. DRRM/SOR/95/2021-2022)					
Application No.: ABMIOWA / Rs. 1000/- Life Member Name :					
Address:					
Contact No.:					
Mode of Payment Cash Cheque* D.D. UPI NEFT RTGS For ABM Infocity Owners Welfare Association (R)					