(Refer Customers Refund Application Form)

APPLICATION FOR REFUND OF MONEY

To,

The Director,

M/S. DHARITRI INFRAVENTURE PVT .LTD.

D/N-51; Merlin Infinite, 8th Floor, Suite-805, Sector V, Salt Lake City, Kolkata-700091

Sir.

I/We wish to lodge this claim for refund of booking money which have been paid in Excess by me/us as per given below:

1. Applicant Name : MD. SHAHNAWAZ KHAN

2. Father/Husband Name: MD. AS LAM KHAN

3. PAN/Aadhar Number: ARKPK 51306

4. Address & Contact no: 3/1/H/7, SIR SYED AHMED RD. WOL-14

(FATHER) -> . 9836593285 19279750708

5. Flat Details / Bungalow Details:

1) Project Name: Buss VIUE

II) BHK

III) Sq.ft. : 2 KOT7AH

IV) Floor

V) Block/Tower

VI) Facing

VII) Flat/Bungalow: BUNGLOW

6. Grounds of Claim (specify)

7. Amount of Refund : 2,05,000 | -

8. Enclosures in original in support of refund claim

PERSONAL 2,05,000/-