



NOBLELAND VENTURES INCORPORATED

BROKER'S ACCREDITATION FORM



Please type or write legibly on the spaces provided below and attach a 1x1 picture on the box provided above.

NAME:

Last Name

First Name

Middle Name

RESIDENCE ADDRESS: _____

MOBILE NO.: _____ **TEL. NOS.** _____

FAX NO.: _____ **E-MAIL ADDRESS:** _____

DATE OF BIRTH: _____ **STATUS:** _____

COMPANY NAME: _____

OFFICE ADDRESS: _____

NAME OF ASSOCIATES / ASSISTANT SECRETARY: _____

REAL ESTATE BROKER'S LICENSE NO.: _____

TAX IDENTIFICATION NO.: _____

BROKER'S AFFILIATION: _____

FOCUSED PROJECTS: _____

This serves as my application for accreditation as an accredited Broker of Nobleland Ventures Incorporated (NVI) for the purpose of marketing and selling condominium units owned and developed by NVI. I conform that all information given by me are true and correct. I authorize NVI to verify and investigate the veracity of all the information provided by me, whether oral or written, from whatever sources or in whatever manner it may consider appropriate under the circumstances. I understand that any misrepresentation or falsification on my part of any information provided by me, whether oral or written, shall give rise to a legal claim against me by NVI, and/or the rejection or revocation of my accreditation.

Signature Over Printed Name

Date