



ACCOMMODATION REQUIREMENT FORM

ATTN: Lisa Anaman

e-mail: lisaprop@truemail.co.th handphone: +66 81 890 8702

NAME: _____ TEL: _____

NATIONALITY: _____

COMPANY: _____ CONTACT NAME: _____

COMPANY ADDRESS: _____

TEL: _____ FAX: _____ EMAIL: _____

TYPE OF PROPERTY: HOUSE TOWN HOUSE APARTMENT CONDOMINIUM

BUDGET: _____ AREA (SQ. METERS): _____ No. of BEDROOMS: _____

FULLY FURNISHED PARTLY FURNISHED UNFURNISHED

MAID'S ROOM BALCONY GARDEN STORAGE

FAMILY MEMBERS: _____ CHILDREN: _____ PETS: _____

LOCATION: SUKHUMVIT (EARLY / MID / LATE) SATHORN/SILOM

CBD (PLOENCHIT / LANGSUAN) PHAHOLYOTHIN OTHERS _____

FACILITY REQUIRED: SWIMMING POOL TENNIS COURT GYM SAUNA

OTHERS _____

PROXIMITY TO SCHOOL: YES NO

NAME OF SCHOOL (if applicable) _____

PROXIMITY TO SKY-TRAIN: YES NO

OCCUPANCY DATE: _____ DATE OF ARRIVAL: _____

REMARKS: _____

Sales Executive: _____

Referred by _____

Date: _____