## **UNDERTAKING BY THE PURCHASER**

I,	s/o,d/o,w/	'o			(purchaser), having		
CNIC	No, in possession of n	ny full facu	ulties and ser	ses and of my	free will and without		
	percion or duress do hereby solemnly affirm and decl						
1.	I have purchased under mentioned plot from _			s/o,d/o,w/o			
	(Seller) having CNIC No	and	have paid a	all the required	I payments prior to		
	signing of this undertaking.						
2.	That I am becoming the member of Capital Smart	City vide N	Membership I	No	as l		
	have purchased a Plot No,S	treet/Lane	e No	_ Sector	measuring		
	Marla/Kanal/Square yard.						
3.	That at the time of purchase/transfer of above men	tioned Plot	t I did/did not	pay taxes (Cer	ntral/Provisional) like		
	Wealth Tax, Property Tax, Value added Tax, etc.						
4.	4. That I will pay all dues/taxes (Central/Provisional) like Wealth Tax, CVT or any other such taxes or fee, w						
	an owner of a plot in Capital Smart City is required			-			
5.	5. Since the charges deposited by me at the time of transfer of plot on my name are provisional therefore						
	prepared to pay any variation in charges on deman			•			
6.	6. I undertake to abide by all existing rules/regulations of Capital Smart City and additions/ amendments etc						
	made therein byelaws from time to time by the Man			•			
7.	I will not make any addition/alteration in the appro	•			ithout prior approval		
	from the Town Planning and Building Control		•				
	change/shifting like Electricity, telephone and Manl	•		•			
	done at my own risk and cost if feasible (Applicable						
8	I will ensure that house tax/ maintenance charges/				scheme/ will be naid		
0.							

Witness	<u>Purchaser</u>	
Signature	 Signature	
Name	 Name	
CNIC No	 CNIC No	
Date	 Date	

## VERIFICATION

Verified on Oath at this <u>Day</u> <u>2018</u> that the contents of the above affidavit are true and correct to the best of my knowledge, information & belief and no material has been concealed there form.

Thumb Impression\_\_\_\_\_

<u>Purchaser</u>	
Signature	
Name	
Date	