



Unit Owner INFORMATION FORM

Unit Details			
Building Name:	Area Sq ft	Unit No.	
Account Information (Internal Use Only)			
Mollak ID:			
Unit Owner (Information)			
Name (First, Middle Initial, Last)		Emirates ID/Passport No:	Date of Birth/Date of Trust
Citizenship		Marital Status	Number of Dependents
Home Street Address		City	State Zip
Primary Email Address	Home Telephone Number	Office Telephone Number	Mobile Telephone Number
Occupation		Company Name	
Employer Street Address		City	State Zip
Unit Representative Authorized by the Owner (Information)			
Name (First, Middle Initial, Last)		Emirates ID/Passport No:	Date of Birth/Date of Trust
Citizenship		Marital Status	Number of Dependents
Home Street Address		City	State Zip
Primary Email Address	Home Telephone Number	Office Telephone Number	Mobile Telephone Number
Occupation		Company Name	
Employer Street Address		City	State Zip

My signature below denotes my understanding of agreement with the information provided on this form. I will notify my investment advisor should any material change occur in my investment objectives and/or financial condition.

Unit Owner's Name

Owner's Signature

Date

Authorized Representative Name

Authorized Representative Signature

Date