$\frac{\textbf{JOINT OWNERSHIP-TRANSFER}}{\textbf{AFFIDAVIT BY THE SELLER}}$

I,s/o,c	d/o,w/o, resident
of	, holding CNIC
No	, holding CNIC, in possession of my full faculties and senses and free will wellernly affirm and declare as under:
and without any coercion or duress do hereby	solemnly affirm and declare as under: -
1. That I am the member of Capital	Smart City vide Membership
	d/transferred a Plot No,Street/Lane
	,measuring(Marla/Kanal, Sq Yd),
in Capital Smart City.	
2. That by virtue of the provisions of bye-I	_aws of Capital Smart City, I hereby return
	and other original letters, for
cancellation and relinquish the said	allotment of plot in favour of Mr/Mrs/Miss
of .	s/o,d/o,w/o, resident holding CNIC No,
Membership/Associate membership No	
2 That having relinguished the plot to Capit	tal Smart City for further Transfer/Allatment
	tal Smart City for further Transfer/Allotment
and nanding over to the Possession of the pic	ot to Mr/Mrs/Miss, s/o,d/o,w/o
	Joint ownership rights and possession of the plot upon the
request of the above said transferee/owner.	
4. That affirm and declare that the name of I	Mr/Mrs/Miss,
s/o,d/o,w/o, sł	nould be entered in the record books of Capital Smart City,
as the joint transferee / owner of the aforesaid	l property.
successor shall have no right, title or, is exclusive jo	
	d my said Membership/Associate membership of the plot, I d allotment of a residential plot in Capital Smart
7. That I further affirm that prior to this tran means what so ever this Membership plot to a	asfer of membership/ plot, I have not sold/ transferred by any any other person/ organization nor any suit is pending in any e said plot/house further more this plot is free from all
8. That whatever is stated above is true to th	e best of my knowledge and belief.
Witness	Deponent:
Signature:	Signature:
Name	Name
CNIC No	CNIC No.
Date:	Date:
	Thumb Impression:

Verification:-	
	that the contents of the above affidavit ation and belief and nothing material has been
	<u>DEPONENT</u>
	Signature:
	Name
	CNIC No
	Date:
	Thumb Impression: