

Project Application Form

Promoter Details

Name*	Chaitanya Foundations Pvt. Ltd
PAN No*	AACCC9905F
Mobile No*	9840765432
FAX Number	NA
Occupation	Promoter
State*	Tamil Nadu
Pin code*	600 020

Father's Name*	N.A
Aadhaar Number*	503447309695
Telephone Number*	04442138851
E Mail*	manurede7@hotmail.com
Address Line 1*	Banyan View, 3 rd Floor,
Address Line 2*	39, Karpagam Gardens, 1 st Main Road, Adyar.
District	Chennai

If it is a firm

Name of the Firm / Company*	Chaitanya Foundations Pvt Ltd
Address*	Banyan View, 3 rd Floor, 39, Karpagam Gardens, 1 st Main Road, Adyar.
Mobile No*	9840765432 / 9884043960
Telephone No	04442138851
FAX Number	NA
E Mail	manurede7@hotmail.com
State*	Tamil Nadu
Pin code*	600 020

Copy of the Registration Certificate*

Name and Photograph and address of Chairman or the Governing Body / Partner / Director etc.,*



Main objects*	V. MANU REDDY Developing residential projects.

For Chaitanya Foundations Pvt Ltd

V. Manu Reddy
Director

Previous Project Details (Last 5 Years only)

Project Name*	Windflower
Current Status	Completed
Category of Building	Residential
Is there any Case Pending	No
Address	No.8/1, Veenus Colony, 2nd Street, Chennai-600 018

Project Description
(Max 500 Characters)

State

District*

Pincode

Stilt + 4 Dwelling Units
Tamil Nadu
Chennai
600018