

KITA IMPIAN On behalf: Seloka Sinaran Sdn Bhd - 200201015568 (583231-D) Pejabat Pengurusan Kita Impian, P-08-01, Pangsapuri Kita Impian, Persiaran Cybersouth Perdana, Cybersouth, 43800, Dengkil Selangor D.E Contact No: 010-912 2192 Email: pmkitaimpian@gmail.com

## **MOVING IN/ OUT APPLICATION FORM**

This form must be filled up and to be submitted to the Management Office for approval at least **forty eight (48) hours** in advance before moving in/ out.

APPLICANT'S PARTICULARS					
Unit No.	:	Status	: Owner / Tenant		
Name	:				
Tel No. (H)	:	Tel No. (HP)	:		
Date	:				
	TEI	RMS AND COND	ITIONS		
1. Tenant is red	uired to seek written conser	nt from Owner to	move out. A copy of the written consent must be		
	the Management Office for r				
2. Owner/Tenar	2. Owner/Tenant is required to complete a permit application form and pay a minimum deposit (amount which				
3. Owner/Tenar					
		n the respective un	it is strictly restricted to the following hours:-		
		n to 5.00 pm			
	turday : 9.00 an	•			
	nday /Public holiday: Not W				
5. The owner o to any other		transit of contents	carried out will not in any way cause any nuisance		
6. Owner/Tenant is advised to use only designated lifts for transporting of goods under the supervision of the building security. Owner/Tenant shall be held responsible for any damage to the lifts caused by the movers and shall bear the costs incurred for such repair.					
			uct other vehicles and residents.		
8. Residents w	ho are moving out shall retu	irn all Vehicle pro	oximity Access card to the Management office in		
<ul><li>good condition. If they ate damaged, lost, stolen, or missing, a replacement cost will be charge accordingly.</li><li>9. All the other rules and regulations stated in the House Rules shall comply.</li></ul>					
MOVING IN/ OUT DETAILS					
Description	: Moving In/ Mo	ving Out (Househo	old goods, furniture, kitchen appliances, etc)		
Date of Moving I	n/ Out :				
Time of Moving I	n/ Out :				
Vehicle No	:				



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WORKER'S PARTICULARS				
No	Name of Worker (s)	I/C or Passport No	Remarks	
1				
2				
3				
4				
5				

## DECLARATION

I/ We hereby agree to abide by all the above stipulated terms and conditions and also agree that the deposit is subject to retention, to the extent of which will be decided by the Management Office, should I fail to adhere or comply with the terms and conditions.

Owner's Signature:

Date

Name :

FOR OFFICE USE ONLY

Acknowledgement of Moving in/out And Receipt of Payment				
Deposit/ Administration Fees	:			

Cash/ Cheque No.	:

Receipt No. :....

Received By/ Date :....

Approved By:	Common Area Inspected by: (after completion of moving in/out)
Name :	Name :
Date :	Date :
Defined of Demosit (Cash/Chasue No	
Refund of Deposit ( Cash/ Cheque No	)
Refund Amount :	
Date :	

Receive By : Signature :

Signature .

Remark

: