

## BADAN PENGURUSAN BERSAMA (JMB) PANGSAPURI VISTA

LAVENDER

No. Pendaftaran: MPSJ/COB PC 0051 Block A1, Pangsapuri Vista Lavender, Persiaran Kinrara Seksyen 3, 47100

Puchong, Selangor

Tel: 03-8070 7278 Faks: 03-8076 8278 Email: jmbvistalavender00@gmail.com

## **MOVE IN/OUT FORM**

APPLICANT NAME			UNIT NUMBER			
APPLICANT TYPE	OWNER	TENANT	PHONE NUMBER			
I/C NUMBER			DATE			
MOVING	IN	OUT	METHOD OF MOVING	LORRY	VAN	CAR
DELIVERY DATE			PLATE NUMBER			

## UNDERTAKING BY THE APPLICANT:

I/We hereby confirm that I have read the House Rule and that I/We will abide to the rules and regulations contain therein. If I contravene the rules and regulations contained in the House Rules, the Management shall reserve the rights to revoke this approval and deposit will be forfeited. Approval of this application is subject to clearance of all management fees.

I/We are fully aware that the Management reserve the rights to forfeit the deposit and refuse entry to the contractor or workers if they are found to misbehave or do not adhere to the rules of the apartment and or the relevant authorities.

I/We also agree to the following conditions:

1. To obtain security clearance by showing a copy of this application to security upon moving in/out	DAY	TIME
2. To protect the common areas and facilities or otherwise incur additional charges if there are damages caused by the movers in and around the facilities and/or the building	Monday to Friday	9.00 am to 5.00 pm
3. To conduct moving works based on the schedule attached on this form.	Saturday	9.00 am to 5.00 pm
4. To inform the Management if a duration extension is required.	Sunday & Public Holiday	Strictly not allowed

A refundable **deposit** of **RM500.00** is required to be placed with one (1) week notice given prior to move in/out date.

In accordance with the terms and conditional set by the JMB, I/We hereby agree to pay a total of RM\_\_\_\_\_as a security deposit via cash term.

APPLICATION	CONSENT				
Applicant	Management				
Name:	Name:				
Signature:	Date:				
Date:	Stamp:				
RETURN VERIFICATION					
Refund date:					
Received by:					
Signature:					

