BADAN PENGURUSAN BERSAMA RESIDENSI VYNE



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services, removal of debris or left-over waster material due to cause of my contractor or (and). Management authorized to charge and bill me/us for such damage and service cost on remo								
Unit No. :								
Purpose of Bulk Move In/Out: 1. I /We wish to request for permission for "Bulk Moving In/Out from								
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 I /We wish to request for permission for "Bulk Moving In/Out from to								
 (Date). Deposit payment (RM) as determine in house rules or by managents. I/We understand the house rules, and Management enforces rules and regulations and agree by it. I/We will undertake to provide full and total protection to the public, common area, sharfacilities, etc before, during and after the bulk move in/out. I/We will be held responsible for reinstatement cost to damage of any common property area services, removal of debris or left-over waster material due to cause of my contractor or (and) Management authorized to charge and bill me/us for such damage and service cost on remove. 								
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Management authorized to charge and bill me/us for such damage and service cost on remo	I/We will be held responsible for reinstatement cost to damage of any common property area, shared							
over waste material/debris. Management have full right to impose penalty or any charged to	Management authorized to charge and bill me/us for such damage and service cost on removal of left							
over waste material/debris. Management have full right to impose penalty or any charged to me/us for any noncompliance.								
Bulk Move In/Out permission Time (Monday-Friday: 9 am to 5 pm / Saturday : 9 am to 1 pm)								
Sunday & Public Holiday not allowed.								
Particulars of Movers / Contractor / Supplier / Forwarder.								
Name of Company :								
Company Address :								
Contractor / Supplier Name :								
Contractor / Supplier Telephone : (O)(H/P)	(H/P)							
Vehicle Registration No. :								
Signature of Applicant								
======================================								
Payment Received (RM) Cash / Cheque # Official Receipt #								
ssued By : Verify By :								
Signed : Signed :								
Name : Name :								
Date · Date								

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REMARKS

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