

PROPERTY: RIANA DUTAMAS (PARCEL 1)

***MOVING IN / OUT**

PARTICULARS OF APPLICANT

Owner/s Name/s & I.C. No. / Passport No:	Unit No. & Tel No.: Email Address :
Mover Company Name & Tel. No.:	Lorry Registration No:
Commencement Date & Time:	Completion Date & Time:

PARTICULARS OF SUPERVISOR/WORKERS

No.	Name of Workers	I.C No. / Passport No	Tel. No.
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

DECLARATION

In obtaining approval from the Management, the Resident/s and Mover undertake to abide by, and be subject to the Management's Terms and Conditions as follows:-

1. Notification of Moving In / Out is to be made on the appropriate forms, preferably 7 days before the intended moving date. A minimum of 24 hours notice is mandatory for security reasons.
2. Tenant/s of the Property will need to obtain a letter of consent on the Moving In / Out from his landlord prior to the Moving In / Out.
3. A deposit of **RM1,000.00 (Ringgit Malaysia: One Thousand Only)** is to be paid to the Management upon notification of moving. **PAYMENTS MUST BE MADE BY BANKERS CHEQUES/CHEQUES/ONLINE BANK IN. NO CASH SHALL BE ACCEPTED.**

All payments can be made payable to : **368 SEGAMBUT SDN BHD (RIANA DUTAMAS)**

Public Bank Account No. 3219178902

Notification via email (saviorianadutamas@gmail.com) of payment made must enclose clear copy of payment transaction slip stating Unit number and purpose of payment.

The Management reserves the right to deduct a sum of money from the deposit collected, at its sole discretion, for any damages caused to the common property in the process of moving.

4. Any lift to be used for the above purpose **MUST** be protected with lift protection at all times for such use, strict care shall be exercised in the moving of furniture or any bulky or heavy items into the lift. Occupant/s shall be responsible for any damage caused to the lift.
5. The Management reserves the right to refuse entry to any mover, if they have not been properly registered for the purposes of transporting.
6. Kindly refund the deposit to _____

.....
Signature of Mover
Company Stamp
Date :

.....
Signature of Owner/s
I/C No
Date :

**Delete where not applicable*

(FOR OFFICE USE)

Deposit Paid RM: _____ Cheque No: _____ Official Receipt No: _____

Approved by: _____ Date: _____ Signature: _____

Remarks: _____

Refund Details			
Form SN:	Cheque No:	Amount RM:	Date: