



House Rules & Residents' Guide
Appendix 4

THE MANAGEMENT CORPORATION STRATA TITLE PLAN No. 2635

BALLOTA PARK CONDOMINIUM

162 Mariam Way, #B1-01 Management Office, SINGAPORE 507085
Tel: 65450847/8 Fax: 6545 0849 Email: info@ballotapark.sg

APPLICATION FOR A MOVING IN / OUT PERMIT

(TO BE SUBMITTED BY THE PROPERTY OWNER / TENANT)

BLOCK NUMBER : _____

UNIT NUMBER : _____

NAME OF SUBSIDIARY PROPRIETOR / TENANT :

(For new tenants a copy of the tenancy agreement is required)

CONTACT NUMBER :

DATE OF REMOVALS :

FROM : _____ TO: _____

NAME OF REMOVAL COMPANY :
(And sub-contractors, if any)

PERSON IN CHARGE :

CONTACT NUMBER :

A REFUNDABLE DEPOSIT OF \$1000.00, PAID BY CHEQUE N^o. _____, MADE PAYABLE TO "THE MANAGEMENT CORPORATION STRATA TITLE PLAN NUMBER 2635" IS INCLUDED WITH THIS APPLICATION AND IS HEREBY SUBMITTED.

I, _____ HAVE READ AND AGREE TO ABIDE BY THE RULES AND REGULATIONS PURSUANT TO THE ISSUE OF A REMOVALS PERMIT.

MY CONTRACTORS HAVE BEEN MADE AWARE THAT THEY ARE REQUIRED TO PRODUCE THE APPROVED APPLICATION FORM UPON ENTRY TO THE PREMISES AND THAT THEY MAY BE DENIED ENTRY TO THE CONDOMINIUM IF REGULATIONS ARE NOT COMPLIED WITH. I AM AWARE THAT THE MANAGEMENT RESERVES THE RIGHT TO ARRANGE FOR THE REMOVAL OF DEBRIS, REPAIR OF DAMAGE CAUSED AND CLEAN UP OF AFFECTED AREAS WITHOUT REFERENCE TO ME AND THAT I WILL BE WHOLLY RESPONSIBLE FOR ALL COSTS INCURRED IN SUCH ACTIONS.

SIGNATURE OF OWNER / TENANT : _____ DATE : _____

TO BE COMPLETED BY BALLOTA PARK CONDOMINIUM MANAGEMENT OFFICE STAFF

COMPLETION INSPECTED BY : _____

REFUND DATE: _____

ACTUAL DATE OF COMPLETION : _____

REFUND CHECKED BY: _____

EVERYTHING IN ORDER, DEPOSIT FULLY REFUNDED.

REFUND RECEIVED BY: _____

COMPLETION NOT IN ORDER : \$ _____ DEDUCTED

I/C NUMBER: _____

BALANCE REFUNDED : \$ _____

RECIPIENT SIGNATURE: _____