

Personal Data Protection ACT (PDPA) Compliance

By providing the information contained in this form, you agree and consent to Management and its authorised representatives and/or Managing Agent collecting, using and sharing the information within the context of this application

FORM 002

MOVING / DELIVERY APPLICATION FORM – IN / OUT
Resident's Particulars

Name : _____	Contact No : _____ (home)
Block : _____	_____ (mobile)
Unit: # _____	_____ (office)

Moving / Delivery Details

Commencement Date/Time: _____	Completion Date/Time : _____
Name of Company : _____	(if applicable)
Address : _____	_____
Name of Supervisor : _____	_____
Contact No. : _____ (mobile)	_____ (office)

Payment Details

Security Deposit : S\$1,000.00 (refundable)	[<input type="checkbox"/>] Cash OR No: _____
Lift Padding Fee : S\$50.00 (non-refundable)	[<input type="checkbox"/>] Cheque No. _____
Note : 1. All cheque payment should be made payable to "MCST Plan No 3635"	
2. Post-dated cheques are not acceptable.	

Undertaking by Resident / Moving Contractor

I confirm that I have read and will abide by the House Rules and By-Laws governing the **Moving / Delivery**.

Lift padding will be provided by the Condominium (MCST 3635). Upon collection of the Lift Padding the Resident / Movers are to put it up and to lay adequate protection for the Lift & Lobbies Floors and Walls which will have to be provided by the Resident / Movers

Moving activities are strictly to be carried out between 9am to 5pm (weekdays) ONLY. No moving activities are to be carried out on Saturdays, Sundays & Public Holidays

General cleanliness of the Common Property shall be maintained, or \$150.00 will be deducted from the Deposit. Smoking within the premises shall be liable to a fine of \$200.00, which will be deducted from the Deposit.

 Signature of Resident

 Date

FOR OFFICAL USE

Acknowledgement/Receipt No. : _____ Date of Issue : _____

 Name of Approving Officer

 Signature

 Date