

## THE MANAGEMENT CORPORATION STRATA TITLE PLAN NO. 3397

44 West Coast Road #B1-01 Varsity Park Condominium, Singapore 126841 Tel: 6776 7992 Fax: 6776 1190 Email Address: mcst3397@gmail.com

(Please apply 3 days in advance.)

**Form 001** 

APPLICATION FOR *BULK DELIVI (Underline type of Application)	ERY / HOUSE M	IOVING IN / MOVING OUT				
Name of Resident:			Unit #			
(*Subsidiary Proprietor/Tenant)	(O#:)	/N A - L-:L-	. \			
Tel No: (Home)	(Опісе)	(MODII6	9)	<del></del>		
Particular of Mover / Company						
1. Name of Mover / Delivery Company	:		·			
2. Commencement Date / Time of Acti	vity :					
3. Completion Date / Time of Activity	:					
	<b>Saturday</b>	Monday to Friday – 9.00am to 5.00pm Saturday – 9.00am to 12.30pm Sunday & PH – No work is allowed				
4. Name of Person-in-charge	:					
5. Company Address	:					
6. Contact No	: (Office)	(Mobi	le)	·		
	Dec	<u>claration</u>				
the Management if the security deposit is into of debris. I will undertake to provide full and to materials etc. I agree to abide by all terms at Name:	otal protection to the l nd conditions stated	ift car panels and floor lift lobbies w	ith canvas p			
Subsidiary Proprietor / Ten	iant		Signatu	re & Date		
Name:						
Mover / Delivery Company	<i>y</i>	Signature &	Date (affix	k Company Stamp)		
Note: (a) All foreign workers engaged by em (b) Any foreign workers without a valid				he security.		
FOR OFFICIAL USE						
Refundable Deposit Collected:	<u>\$1000</u>	*Cash Receipt/Cheque	No:			
Name & Signature of Approving Officer	-	Note: Cheque should be				
Date:		Post-dated cheques are	not accept	cu.		

By furnishing the Management Corporation with my personal data in this Form, I hereby confirm that I have read ,consent and agree to the collection, use and disclosure of any of these personal data for security, safety and other purpose as set out in the Management Corporation's Privacy Policy Statement issued in accordance with the Personal Data protection Act(Act 26 to 2012) (the "PDPA"). And if I have provided personal data of individuals other than myself in this Form, I also confirm that I have sought the requisite consent from these individuals to the collection, use and disclosure of their personal data. In particular, I confirm that I have informed these individuals of the purposes for collection, use and disclosure of their personal data.



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(Please apply 3 days in advance.)

**Form 001** 

APPLICATION FOR USE OF THE LIFT			
We,(Name of Subsidiary Proprietor)	Of Block	Unit	
(Name of Subsidiary Proprietor)			
wish to apply for use of the lift to transport goods, rene(Level).	ovation material etc. fror	n	(Level) to
1. Moving of goods, equipment etc. into building;			
2. Moving of goods, equipment, renovation debris	s out of building		
3. Moving of goods, equipment from one floor to	another		
4. Bring in material for renovation			
5. Others:			
Please tick  relevant box			
Name of mover / renovation contractors (s) (if applicable)	)		
Date & Time Lift Required			
(Date)	(Tir	me: From-To)	
We agree to abide by all the terms and conditions state and Usage as contained in the Resident's Handbook or			
Authorised Signature of Subsidiary Proprietor		(Date)	_
То			
We confirm that you are authorized to use(Date)	the lift No		on
From(Time) to	(Time)		
Please report and register at the Guard House at main entr	rance before you use the li	ft.	
(Authorised Signature)		(Date)	
Notes:			

- 1. Application form shall be completed and handed over or faxed to the management 48 hours in advance if you wish to make use of the lift.
- Request to use lift for bilk delivery of item and equipment is subject to availability Contractors shall only use designated lifts (lift with perspex, caves or plywood protection) to transport their building materials or debris, if the protection is dismantled, the contractor shall provide his own materials to protect the lift components adequately.
- 3. The lifts are not meant for exclusive use.

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