



**(Please apply 3days in advance.)** **Form 004**

**APPLICATION FOR ADDITION & ALTERATION / RENOVATION WORKS**

Name of Subsidiary Proprietor (S): \_\_\_\_\_ Blk: \_\_\_\_\_ Unit # \_\_\_\_\_

Tel No: (Home) \_\_\_\_\_ (Office) \_\_\_\_\_ (Mobile) \_\_\_\_\_

**Particular of Contractor**

1. Name of Company : \_\_\_\_\_
2. Commencement Date of A&A/Renovation : \_\_\_\_\_
3. Completion Date of A&A/ Renovation : \_\_\_\_\_  
**Monday to Friday – 9.00am to 5.00pm**  
**Saturday – 9.00am to 12.30pm (No smell & No noise work)**  
**Sunday & PH – No work is allowed**
4. Name of Person-in-charge : \_\_\_\_\_
5. Company Address : \_\_\_\_\_
6. Contact No : \_\_\_\_\_

**Description of A&A / Renovation Works**

<b>A&amp;A / Renovation Items:</b>  <i>*All relevant documents such as plans / sketches and approvals from the relevant authorities (if necessary) must be attached to this application</i>	1) _____
	2) _____
	3) _____
	4) _____
	5) _____

\*Please attach separate list if scope of works exceeded the space above.

I/We declare that I/We have read, understood and will abide by all the By-laws governing A/AA Works. I shall be fully responsible to reimburse the Management if the security deposit is inadequate to defray all costs of making good of damage to common properties and removal of debris. I will undertake to provide full and total protection to the lift car panels and floor lift lobbies with canvas padding when transporting materials etc. I agree to abide by all terms and conditions stated herein including the joint indemnity.

Name: \_\_\_\_\_  
 Subsidiary Proprietor (S)

\_\_\_\_\_  
 Signature & Date

Name: \_\_\_\_\_  
 Renovation Company

\_\_\_\_\_  
 Signature & Date (affix Company Stamp)

Note: (a) All foreign workers engaged by employer /resident are required to show their original work permit to the security.  
 (b) Any foreign workers without a valid work permit at side will not be allowed entry or to work.

**FOR OFFICIAL USE**

**Refundable Deposit Collected: \$1000**

\*Cash Receipt/Cheque No:

\_\_\_\_\_  
 Name & Signature of Approving Officer

**Note: Cheque should be made payable to "MCST3397"**  
**Post-dated cheques are not accepted**

Date:

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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**Form 004**

**APPLICATION FOR USE OF THE LIFT**

We, \_\_\_\_\_ Of Block \_\_\_\_\_ Unit \_\_\_\_\_  
(Name of Subsidiary Proprietor)

wish to apply for use of the lift to transport goods, renovation material etc. from \_\_\_\_\_(Level) to \_\_\_\_\_(Level).

- 1. Moving of goods, equipment etc. into building;
- 2. Moving of goods, equipment, renovation debris 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) (Time: From-To)

**We agree to abide by all the terms and conditions stated overleaf and the House Rules governing House Moving and Usage as contained in the Resident’s Handbook or any changes thereafter as determined by the Management.**

\_\_\_\_\_  
Authorised Signature of Subsidiary Proprietor (Date)

To \_\_\_\_\_

We confirm that you are authorized to use the lift No. \_\_\_\_\_ on \_\_\_\_\_(Date)

From \_\_\_\_\_(Time) to \_\_\_\_\_(Time)

Please report and register at the Guard House at main entrance before you use the lift.

\_\_\_\_\_  
(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.
  2. Request to use lift for bulk 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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