

APPLICATION FOR * MOVING-IN / MOVING-OUT / BULK DELIVERY(S)

Name of Resident (*Owner / Tenant): _____
 Block No.: _____ Unit No.: _____ Email: _____
 Tel. No.: (H) _____ (O) _____ (HP) _____
 Date of Commencement: _____ Date of Completion: _____

Documents Required (Please tick):

- Owner – Proof of resident e.g. NRIC
- Tenant – Tenancy Agreement & Owner’s Authorisation Letter

Particulars of Contractor:

Co: _____ Person in Charge: _____
 Address: _____
 Contact No.: (O) _____ (HP) _____ (Email) _____
 Person to Contact (for emergency): _____ Contact No.: _____

I confirm that I have read the By-Laws of MCST 3634 governing House Removal and enclose herewith a cheque of **S\$1,000.00 (payable to “MCST 3634”)** as security deposit. I understand that this deposit will be refunded to me upon completion of work if no claim is made against me (Please refer Page 2-3 of this attachment).
 A fee of **S\$50.00 (inclusive of GST)** for the usage of lift protection package is to be made payable to “MCST 3634”.

By providing your personal data (e.g. name, contact, identification and/or vehicle number) to us, you agree that MCST 3634 (“**Organisation**”) may collect, use and disclose such information for security and monitoring purposes. You further agree that such information may be disclosed to the Organisation’s related corporations and third parties who provide services to the Organisation.

 Resident Name Signature & Date

 Contractor Name Signature & Date

 Company Stamp of Contractor

FOR OFFICIAL USE - * Moving-In / Moving-Out / Bulk Delivery

The bearer of this note is authorised to have access to Dakota Residences to do moving works at:

 Block No.: _____ Unit No.: _____
 Date of Commencement: _____ Date of Expiry: _____
 Name of Contractor _____

Deposit and Fee Collected: S\$1,000.00 (Refundable Deposit) / S\$50.00 (Lift Protection Package)

- By Cash / Receipt No.: _____
- By Cheque / Cheque No.: _____
- Acknowledgement Slip No.: _____ Date of Issue: _____

The Management of Dakota Residences
 (Name & Signature of Officer): _____

Section 7 – Moving In and Moving Out

1. Moving In/Moving Out may be carried out on the following days and hours

Monday to Friday	- 9.00 am to 5.30 pm
Saturday and Sunday	- 9.00 am to 12.30 pm
Public Holidays	- No Moving In/Moving Out Activities
2. Residents are required to submit Form DR002 to the Management Office together with payment of **\$1,000.00** as security deposit at least 3 days prior to the date of moving in or moving out. The deposit will be refunded without interest upon completion of the work if no damage of property or human injury is caused. The deposit will be refunded within 30 days from the day of receipt of the application of refund made to the Management Office.
3. All removal Contractors engaged to carry out such removals must report to the security guardhouse to obtain identification passes and must wear their passes at all time prior to carrying out the work each day; failing which, the Management reserves the right to refuse entry to unknown persons, not being a Resident or lawful user of the Common Property, whose reasons for being present in the Development cannot be verified. The Management's security personnel shall have the right to question any person in the Development found without a pass.
4. All removal Contractors shall ensure that adequate protective covers are put up inside the lift car and flooring and lobby when conveying furniture and fittings to and from the Housing Unit, at the Resident's own expense.
5. All removals and workmen should use only lifts and staircases designated by the Management by prior arrangement so as to minimize inconvenience to Residents. Any packing and crates removed must be disposed off by the Resident concerned accordingly and at his cost.
6. No unwanted materials, debris, etc. should be left in the corridors, lift lobbies, fire escape staircases or any other Common Areas. Failing which, they will be removed by the Management and the cost of such removal shall be charged to the Resident concerned.
7. Disposal of cardboard boxes and/or any unwanted materials from the moving in/out Contractors into the bin chute is strictly prohibited.
8. Residents shall ensure that no damage is caused to any part of the Common Areas, Common Property or the building during such removal. Any damage caused shall be rectified by the Resident concerned at his own cost forthwith upon receipt of notice to that effect from the Management. Residents shall also indemnify the Management for any liability claim or action taken by third party due to the negligence of removal contractors.
9. Residents shall be responsible for the conduct and behavior of their appointed Contractors while they are in the Development.
10. Container vehicles (20 footer and beyond) and vehicles exceeding 2.2m in height are not allowed in the Development. Residents are advised to inform their movers accordingly before the move takes place.
11. Moving vehicles are to park at the location designated by the Management or security guards so as to minimize nuisance to Residents.

TAKEOVER & HANDOVER AFTER *BULK DELIVERY / RENOVATION

Name of Resident: (Owner / Tenant): _____ Blk No.: _____ Unit No.: # _____ - _____

S/no	Location	Thing to check	Status of defect		Defect(s) Remark
			YES	NO	
1	LIFTS and LIFT LOBBY	Any dent cause to the internal / external door			
		Any damage cause to the lift call button			
		Any other damage within the internal lift structure			
		Any damage to the main lobby door			
		Any damage at the lobby area			
		Any carton paper shaft between lift door and carriage			
		Use of lift and wall protection			
2	Common Area (Car park level and resident lift yard area)	Any damage cause to the Service door etc : scratch / dent			
		Any damage to door hinge, intercom panel			
		Any damage to the wall paint			
		Any damage to the pillar leading to the service door			
		Any debris and card board left unclear			
		Any damage cause to the car park lot by the delivery items			
3	OTHERS				

Acknowledgement by Contractor Representative

Check performed by

Name of representative :

Name of Guard :

Name of Company :

Signature :

Signature :

Date & Time :

Telephone Contact :

Date & Time :

This form must be submitted to the Estate management office upon completion of delivery or works for deposit cheque refund. Arrangement(s) to complete defect(s) reported above by contractor (if any):