

11 GURNEY DRIVE

RENOVATION WORKS APPLICATION FORM (RWA-1)

I, the undersigned wish to renovate my apartment unit referenced below and agree to abide to all the rules and regulations enforced by the Management.

Unit No. : _____
Name : _____
Address : _____
Contact No. : _____

I hereby confirm that I have received, read and understood my rights and obligations with respect to the House Rules and Regulations covered in the Sales and Purchase Agreement, Deed of Mutual Covenants, Apartment Manual and Renovation Guidelines.

Signature of Owner : _____
Date of Application : _____

Please fill in the following information

Will there be hacking / drilling works : Yes No

If yes, please tick :-

- | | | | |
|---|--------------------------|--|--------------------------|
| 1. Masonry - Demolition Walls | <input type="checkbox"/> | 4. Suspended Ceiling | <input type="checkbox"/> |
| - Hacking Wall / Floor | <input type="checkbox"/> | 5. Alteration & Addition To Electrical Points & Wiring | <input type="checkbox"/> |
| - Erection of New Walls (Brickwork, Concreting or Plastering) | <input type="checkbox"/> | 6. Alteration To Air-Conditioning | <input type="checkbox"/> |
| 2. Carpentry (kitchen, wardrobe, woodworks) | <input type="checkbox"/> | 7. Alteration To Plumbing & Sanitary Fittings and Piping | <input type="checkbox"/> |
| 3. Iron Works | <input type="checkbox"/> | 8. Others (Pls. Specify)..... | <input type="checkbox"/> |
| | | | |
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| | | | |

PROPOSED DESIGN / SPECIFICATION / SCHEDULE OF WORKS

Please enclose with this application your ID's design plans and specification for the proposed renovation works and your contractors' works schedule. (Note : 7 days for approval)

Proposed Commencement Date : _____

Expected Completion Date : _____

FOR OFFICE USE ONLY

1) Date of Commencement of Work : _____

2) Date of Completion of Work : _____

3) Renovation Deposit Receipt No. : _____

4) Amount RM : _____

5) Date Application Received : _____

6) Date Application Approved : _____

7) Approved by (Name) : _____

8) Signature : _____