

HANOVER CHECKLIST

Date _____

Building Name: Viera Residences

Unit No: _____

Purchaser _____

Purchaser POA (*if applicable*) _____

Document Verification

- | | | | |
|---|--------------------------|-------------------|--------------------------|
| Original SPA | <input type="checkbox"/> | DEWA registration | <input type="checkbox"/> |
| Power of Attorney | <input type="checkbox"/> | AC registration | <input type="checkbox"/> |
| Bank NOC (<i>verified for mortgage</i>) | <input type="checkbox"/> | Passport / ID | <input type="checkbox"/> |
| Letter of Discharge and Adherence signed | <input type="checkbox"/> | | |

For Companies :

- | | |
|--|--------------------------|
| Trade License / Certificate of Incorporation* | <input type="checkbox"/> |
| Articles & Memorandum of Association* | <input type="checkbox"/> |
| Registered shareholders & Directors of the Company - Share Certificate & | <input type="checkbox"/> |
| Notarised Attested Power of Attorney with company stamp signed by | <input type="checkbox"/> |

**In case originals are not available, legally attested copies to be presented*

Unit visit Parking visit Amenities visit Checklist received

Deficiencies list issued/signed _____ Remarks: _____

DEWA Premise Number: _____

Receivables

No. of Main Door Keys: _____ Handover Pack: _____

No. of Access Cards Issued: _____ Card No's: _____

I/We hereby declare that I/we have checked all the items above and have received back all the original documents.

Purchaser _____ Signature _____

Joint Purchaser _____ Signature _____

Purchaser POA (*if applicable*) _____ Signature _____

Handover/Orientation completed by (Name) _____ Signature _____