

HANDOVER 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 (verified for mortgage)	<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 ☐ Amenties 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 _____