



AUTHORITY TO MOVE-IN **(FOR LEASED OUT UNITS)**

(Date)

This is to authorize Mr./ Ms. / Mrs. _____ to move-in to our unit _____ effective _____ until the expiring of contract on _____
(Attach copy of lease contract, client information sheet/occupants ledger, and recent passport for foreigner, etc.)

For and in consideration of the approval by Knightsbridge Residences Condominium Corporation ("KBRCC") of the use and occupancy of said unit, Mr. / Ms. / Mrs. _____ and family bind themselves to comply with the MASTER DEED with Declaration of restrictions, the Articles of Incorporation, the By Laws and House Rules and Regulations of KBRCC.

It is understood that the approval of this authorization does not relieve the lessee from any of the obligations imposed on KBRCC unit owners.

OWNER'S/TENANT'S ACCOUNTABILITIES:

Name of Unit Owner : _____ Unit No. : _____
Address : _____ Tel. No. : _____

Name of Unit Tenant : 1) _____
2) _____
3) _____
4) _____

Association Dues
Utilities
Other Billables

Owners	Tenant	Remarks

Authorized by:

(Signature over printed name of the Unit Owner)

Verified by:

Leasing Services Specialist/ Manager/ Broker-in-Charge
(Signature over printed name)

Approved by:

Operations Manager/General Manager
(Signature over printed name)

Conforme:

(Signature over printed name of the Lessee)

Checked by:

Staff Assistant
(Signature over printed name)

Certified by:

Billing Assistant/Chief Accountant
(Signature over printed name)

Managed By



Century Properties Management Inc.

By signing below, I agree to the Privacy Notice of Knightsbridge Residences and giving my consent to the collection of my personal data in accordance thereto.