

KNIGHTSBRIDGE RESIDENCES CONDOMINIUM CORPORATION

Century City, Brgy. Poblacion, Makati City

AUTHORITY TO MOVE-IN

(FOR LEASED OUT UNITS)

				07/04-2	5			
					(Date)			
his is to authorize N	Лr./ Ms. / N	Service to the servic	g again	n to move-in to our unit				
4317	effective	07/16-25	until th	ne expiring of o	contract on			
07/25-25		(Attach copy of lease contract, client information sheet/occupants ledger, and						
ecent passport for for	reigner, etc.)							
se and occupancy o	f said unit, with the MA	Mr. / Ms. / Mrst ASTER DEED with Decla	e Residences Condomi rying again ration of restrictions, t	an	d family bind			
t is understood that mposed on KBRCC un			does not relieve the ACCOUNTABILITIES:	lessee from any of th	ne obligations			
	Sol Ba	95	4400.40	4317				
Name of Unit Owner Address	301 158	Sol Baes		Unit No. : 4317 Tel. No. : 09152151745				
1001 633	*		Tel. No.	00102101710				
Name of Unit Tenant	: 1) tryin 2) nam							
	21							
	4)							
	F	Owners	Ti	enant	Remarks			
Association Due	s							
Utilities								
Other Billables	I,							
Authorized by: Adaffa Kijschi	, novsky		Conforme	E	lotice of nt to the			
Signature over printed i	name of the U	nt Owner)	(Signature	over printed name of ti	he Lessee) A See See See See See See See See See S			
Verified by:	1		Checked b	y:	Arvan Co			
Adam Kischii	novsky				Malle			
Leasing Services Specialist/ Manager/ Broker-in-Charge (Signature over printed name)			Staff Assi	stant	1 = 5			
			(Signature	(Signature over printed name) 0 60 c				
Approved by:			Certified	by:	agree h			
		-	\$6000000000000000000000000000000000000		- E			
Operations Manager/General Manager (Signature over printed name)				sistant/Chief Accountant e over printed name)	1 (1)			
				4	signing be htsbridge			
	The state of the s	0 10 10			EN 2			



PROXIMITY CARD REQUEST FORM										
Unit No. 4317				Date	07/	04-25				
Applicant (Name & Signature)						Owner		X	SPA / Representative	
		Adam Kis	chinovsky	y		Deper	ndent		Tenant	
PURPOSE										
☐ New/Addl ☐ Repla			cemer	nt 🗆 Deacti		tivatio	n			
		Activation Reactivation		ĭ	☐ Return fo			fund/Transfer		
		Extension of Validity	Checkir	ng/Validation			ement Receipt			
	Nar	ne (existing & appl	icant)	Pltm	Gold	Red	Grn	Blk	Status of Applicant	
1	tryir	ng again								
2	nam	ne 2								
3										
4										
5										
Veri	Verification									
	☐ Endorsement from unitowner/SPA (letter/email, attached)									
		Copy of Lease Contract/Length of Stay								
O/D		Official Receipt No Amount: Date:								
O/D		Acknowledgement Receipt No Amount: Date:								
		☐ Card tested out: in good condition/ damaged/ defective								
		last used onSerial No								
		Surrendered Card	No							
		LOST Card	last used on _		S	erial No.				
Verified by Ap				Appro	approved by					
PMO /Security					Operations/General Manager					
Received by				Date/Time						
Endorsed for (programming/refund)			Date/Time							
Programming/Refund by			Date/Time							
Polograd to					Date/Ti	me				



AUTHORITY TO MOVE-IN CHECKLIST

UNIT NUMBER: _4317

LONG TERM	SHORT TERM					
NEW TENANT	ADDITIONAL TENANT		REPL TENANT TO:			
UPDATED IN ACCTG	UPDATED IN A	CCTG	UPDATED IN ACCTG			
W/ PROMI UNTIL:	W/ PROMI UNTIL:		W/ PROMIUNTIL:			
W/ID / PASSPORT	W/ID / PASSPO	ORT	W/ID / PASSPORT			
W/ WORKING VISA /	W/ WORKING VISA /W/ WORKING V		W/ WORKING VISA /			
TOURIST VISA	DURIST VISA TOURIST V		TOURISTVISA			
W/ CONTRACT TO LEASEW/ EXISTING CO		NTRACT	W/ EXISTING CONRACT			
W/ ENDORSEMENT	W/ AUTHORIZATION FRO		W/ ATHORIZATION FROM CONTRACT SIGNATORY			
W/ COE	W/ COE		W/ COE			
TRANSFER TENANT		OTHER REM	MARKS:			
UPDATED IN ACCTG.		SIGN BY: O	WNER / SPA / AUTHORIZED			
W/ PROMI UNTIL:		W/ PET				
W/ID / PASSPORT		W/ PARKING: RENTED / OWNED				
W/ VISA (IF FOREIGN)		SUBMITTED BY: OWNER / SPA /				
FROM UNIT			AUTHORIZED MALE			
W/ AUTHORIZATION FROM PREVIOUS UNITHOUSE RULES RECEIVED WWW.						
W/ CONTRACT TO LEASE						