

APPLICATION FORM FOR RESIDENT ACCESS CARD**PARTICULARS OF APPLICANT**

Name					Owner / Tenant / Agent *
Parcel / Unit No.			NRIC / Passport No.		
Contact No.	H/P		H		O
Tenancy Commencement			Tenancy Expiry		
Vehicle No.			Parking Lot No.		

PARTICULARS OF ACCESS CARD

No.	Type of Transaction	Access Card No.	OR	Amount
1.	Apply New Card			
2.	Card Replacement			

ACCESS CARD RATE:

Type of Card	Rate of Card	Remarks
A. MAIN ACCESS CARD <i>1 or 2 car park / door access</i>	FOC	According to S&P (First issuance by Developer)
B. RESIDENT CARD <i>Door access and lobby only</i>	FOC	According to S&P
C. LOST OR DAMAGE MAIN ACCESS CARD Lost or damage main access card (First Time) Lost or damage main access card (Subsequence)	RM 100.00 RM 200.00	
D. LOST OR DAMAGE RESIDENCE CARD Lost or damage residence card (First Time) Lost or damage residence card (Subsequence)	RM 80.00 RM 160.00	

** Delete where not applicable***Terms & Conditions:**

- Owner with rented unit must declare that the right of access card holder is transferred to the tenant. An authorisation letter from owners must be obtained if collecting on behalf for tenants. A copy of the Tenancy Agreement must be enclosed.
- The access card is part of the security system for Trinity Aquata Residence prominently entered by using the access cards.
- Any loss of access card must be immediately reported in writing accompanied with a police report to Management Office and a replacement access card will be issue after the payment of the prescribed fees.
- Access Cards are issued to Occupants only and are not transferable.
- Owners are reminded not to leave the access cards or valuables inside their vehicles.
- Additional access card (subject to **Maximum 2** cards per room for Trinity Aquata including Main Access Cards which have taken into calculation).
- The Management reserves the rights to amend, alter or add on to the above conditions as and when it's necessary for the benefit of the residents.

Receival of Access Card

Received By Applicant:

I hereby accept all terms and condition stated as above mention.

Name: _____

Date: _____

FOR OFFICE USE ONLY

Payment Received	RM	Cash/ Chq. No		O/R No.	
Issued Date			Approved By		
Issued By					