

MEGAN AMBASSY MANAGEMENT CORPORATION
APPLICATION FOR RENOVATION/INSTALLATION WORKS

Apartment Unit No : _____ Tel No. : _____
Name of Application : _____ IC/Passport No: _____

I, the above mentioned name hereby authorize my Contractor to carry out renovation works to my above property for the period from _____ to _____ (approximately ____days). As such please allow the Contractor, their workers and vehicles (if necessary) to enter the apartment area.

• **Nature of Renovation / Installation Works (tick [√]):**

<input type="checkbox"/> Interior Finishes (wall,floor etc)	<input type="checkbox"/> Electrical
<input type="checkbox"/> Carpentry/Cabinets	<input type="checkbox"/> Air Conditioners
<input type="checkbox"/> Awnings/Shades	<input type="checkbox"/> Plumbing
<input type="checkbox"/> Iron Works/Grille	<input type="checkbox"/> Others. _____

I also understand that my Contractor will be responsible to clear all debris upon completion and the works shall comply with the terms set out in the House Rules and Guide Book. I agree that if any Contractor failed to do so, the Management reserves the right to take remedial action including removal of the works and charge/fine all costs of such remedial action to me or deduct Rm 200.00 per offence from my **Refundable Deposit payable to Megan Embassy Management Corporation (MAMC). **The deposit at the minimum of renovation RM1,000.00**

Renovation working hours (excluding public holidays):

▶ Monday to Friday : 09.30a.m – 5:30p.m
▶ Saturday : 9.30a.m to 1.00p.m
▶ Those work that may generate noise is only carry out at 11.00a.m t4.00p.m (Monday to Friday)

• **Below is my appointed Contractor:**

1. Name of Contractor/Company : _____
2. Address : _____
3. Contact No. : _____
4. Contact Person : _____

Enclosed is a payment of **RM** _____ as the **Refundable Deposit.

***The Management reserves the right to determine the amount of deposit depending on the job to be undertaken*

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Signature of Applicant

FOR OFFICE USE ONLY

Approve/Not Approve : _____
Deposit : _____
Cash/Credit Card : _____
Receipt No. : _____

REFUND DEPOSIT

Deposit Amount : _____
Less : _____
Total Refund : _____
Refund Received by : _____