Lot/Unit No :	/Unit No : Phase/Parcel : 1A TYPE E1		Date :		
Owner's/Representative Name :	Contact No :		Address:		
GROUND FLOOR TERRACE 2 UTILITY 2 WET KITCHEN LIVING BATH-76 UTILITY 1 POWDER ROOM FOYER ROOM FOYER TERRACE 1 BATH 5 CARPORCH	BALCONY MASTER BATH BEDROOM BATH 4 STORE 3 BEDROOM BATH 4 BEDROOM BATH 2 BEDROOM BATH 2	Item	Descr	ption	
Acknowledgement Section					
By Key - No. of key received	pc(s)				
Others - Please specify: Note: Tick if complaint received via email / call / others.	Acknowledgement After Rectification / Re-inspection I confirmed that the defects encountered have been attended.				
Owner/Authorized Representative	Developer's Representative	Owner/Author	ized Representative	Developer'	s Representative
(Signature) Name :	(Signature)	*Keys returned (pc) :	gnature)		gnature)
Email Call Cothers Pls specify:	Name : Date :	Name : Date :		Name : Date :	
	Date.	Dale .		Date .	