Lot/Unit No : 1037 Phase/Parcel : 1A TYPE A1 (CORNER & END LOT) Date :				
Owner's/Representative Name :	Cor	ntact No :	Address :	
	Item	m Description		
GROUND FLOOR FIRST FLOOR	Itom	50001	iption	
GUEST ROOM TERRACE				
MASTER BEDROOM MASTER				
BATH 4 LIMING				
98 1907.ti				
DINING STORE FAMILY AREA				
STORE 3				
FOYER BEDROOM BEDROOM				
STORE STORE				
CARPORCH				
Acknowledgement Section				
By Key - No. of key receivedpc(s)				
By Appointment				
Others - Please specify:	Acknow	ledgement After Rectification / Re-inspection		
Note: Tick if complaint received via email / call / others.	I conf	firmed that the defects encountered have been	attended.	
Owner/Authorized Representative Developer's Representative		Owner/Authorized Representative		Developer's Representative
(Signature)		(Signature)		
Name : (Signature)	*Keys returned (pc) :			(Signature)
Email Call Name :	Name :			Name :
Others Pls specify: Date :	Date :			Date :