Lot/Unit No :	Phase/Parcel: 1A TYPE A1 (INTERMEDIATE)		Date :
Owner's/Representative Name :	Contact No :	Address:	
GROUND FLOOR FIRST FLO GUEST ROOM TERRACE MASTER BEDROOM BATH 2 BEDROOM CARPORCH CARPORCH	Item MASTER BATH FAMILY AREA BEDROOM 3	Description	
Acknowledgement Section By Key - No. of key receivedpc(s) By Appointment			
Others - Please specify: Note: Tick if complaint received via email / call / others.	Acknowledgement After I confirmed that the confirme	Rectification / Re-inspection efects encountered have been attended.	
Owner/Authorized Representative Developer's Rep	resentative Owner/Au	thorized Representative	Developer's Representative
(Signature) Name : (Signature) Email Call Name :	*Keys returned (pc) : Name :	(Signature)	(Signature) Name :
Others Pls specify:	Data		Data :