

ARDMORE PARK

VEHICLE REGISTRATION FORM

Name : _____

Blk & Unit : _____

Contact No : (H) _____ (O) _____
(HP) _____

Vehicle No*	IU Label No

*Please indicate the vehicle/s which you wish to park at Basement 1 (up to a maximum of 2 vehicles). Please attach a photocopy of vehicle registration card with this form.
(Without this your vehicle will not be registered)

DECLARATION BY OWNER/TENANT

I am a resident at the abovementioned unit is Ardmore Park and all the above particulars given by me are true and correct.

I have read and confirm my acceptance and conditions herein

Signature

Date