



## **LEAVE OF ABSENCE FORM**

Date Filed:	Tower & Unit No.
Name of Resident/s:	
<i>Expected Date of Leave</i>	
To:	From:
Electricity <input type="checkbox"/> Water <input type="checkbox"/> Gas <input type="checkbox"/>	
Shut Off:	Turn on:
Contact details while on leave:	
<i>Contact Person/s in case of emergency</i>	
Name of Representative:	
Contact no.	Email address:
Address of Representative:	
<i>Remarks</i>	



**REMINDER IN CASE OF EXTREME EMERGENCY:**

Property Management Office representatives and agents are authorized to enter any unit in the building in case of emergency or if there are indications of an emergency such as fire or flood whether or not occupant is inside the unit and even if such entry may cause damage to the said unit.