

**THE MANAGEMENT CORPORATION STRATA TITLE PLAN NO. \_\_\_\_\_**

Name of Estate: \_\_\_\_\_

**APPLICATION FORM FOR RENOVATION WORKS**

Owner/Residents

Name: \_\_\_\_\_

Blk. & Unit:  
\_\_\_\_\_

Contact No: (H) \_\_\_\_\_ (O) \_\_\_\_\_ (HP) \_\_\_\_\_

**Contractor**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Co. Regn No: \_\_\_\_\_ Person-in-charge: \_\_\_\_\_

Contact No: (O) \_\_\_\_\_ (HP) \_\_\_\_\_ (FAX) \_\_\_\_\_

**Description of works:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there any Additions/Alterations to electrical system including air-conditioning system? \* Yes / No  
\*(Delete where applicable)

Proposed Date of Commencement: \_\_\_\_\_

Estimated Date of Completion: \_\_\_\_\_

\*Approved / Not Approved: \_\_\_\_\_  
(Name & Signature)

## **Terms & Conditions**

### **1. Application for Approval**

Prior to the commencement of Renovation Works, Owners/Residents shall submitted the prescribed application form at least seven (7) days in advance for Management's approval. These forms can be obtained from the Management Office. For Renovation Works, copies of all relevant must be submitted together with the application form for Management's approval. This is to enable Management to have sufficient time to notify other residents who may be affected by the works to be carried out.

No work is to be carried out until approval from the Management is obtained.

Owners/Residents and their appointed contractors shall undertake to abide by and be subjected to all terms and conditions stipulated therein.

The Management reserves the right to refuse entry to any contractor if the application is not duly submitted.

The Management, in its absolute discretion, reserves the right to reject any application and revoke any approval granted. The Management shall not be liable for any damages arising from rejection of the application or revocation of the said approval.

### **2. Deposit**

A sum of S\$\_\_\_\_\_ shall be paid as deposit upon application. The cheque shall be made in favour of "**The Management Corporation Strata Title Plan No. \_\_\_\_\_**" before approval is granted for the renovation work.

Such deposit will be refunded to the Owner/Residents when the Management is satisfied that the Owners/Residents or their appointed contractors have not damaged any common area, left debris or caused any inconvenienced to the building for which the Management would have incurred cost to rectify.

Should the expenses of such rectification exceed the deposit, the Owners/Residents concerned shall be liable to pay the difference.

### **3. Working Hours**

The working hours for the approved works shall be:

Mondays to Fridays : 9.00am to 6.00pm  
Saturdays : 9.00am to 1.00pm

***Renovation Works are not allowed on Sundays and Public Holidays.***

The Management reserves the right to stop any works which interfere with the quiet and peaceful enjoyment of Owners/Residents.

#### **4. Security**

All workers of the appointed contractors must report daily at the security checkpoint to obtain identification passes for access into \_\_\_\_\_ and must wear their passes at all time.

Security personnel have the right to question any personnel, found without a pass. Other than the designated work area, no worker is allowed to loiter in \_\_\_\_\_.

Owners/Residents shall be responsible for the good conduct of their appointed contractors and the isted sub-contractors. Any worker who refuses to comply with the security procedures will be dismissed from \_\_\_\_\_ immediately and barred from further entry.

#### **5. Lift/Staircase And Cleanliness**

##### Lift/Staircase

Only designated lifts and staircase are to be use by the appointed contractors. Owners/Residents will have to take responsibilities for any damages to the lift/staircase, to the lift walls and flooring when transporting; furniture, etc to and from the residence.

##### Cleanliness

No debris, materials, equipments is allowed to be placed in the common area. All debris must be removed from the site daily. The Management reserves the right to remove them and charge the disposal cost to the Owners/Residents concerned.

#### **6. Others**

The Managements shall have the authority to demolish unauthorized additions or alterations, by giving (7) days written notice to Owners/Residents concerned, requesting them to remove them and all cost shall be borne by the Owners/Residents.

Owners/Residents and their appointed contractors must inform the Management of their schedule of works prior to commencement of works. All renovation works should be confined to the boundaries of the residence. All necessary precautions should be taken against any damages, etc and Owners/Residents will be responsible for any cost of damages from affected residence.

The Management has the authority to access into the residence under renovation for the purpose of checking and assures no unauthorized work being carried out.

The Owners/Residents and their Contractors shall be liable and shall indemnify the Management against any damages, expenses, losses, etc or proceedings due to injury of any kind to any property real or personal insofar, as such injury or damage arises out of or in the course of or by reason of carrying out renovation works and provided the same due to negligence, omission, breach of contract or default of the Owner/Contractors or any person for whom the Contractors are responsible including the Contractors' servants or agents or any sub-contractors, whether direct or indirect, and their servants or agents.

We, the Owners/Residents and Contractors, as abovementioned, have read and confirm my acceptance of the terms and conditions herein and shall be liable for the breach of any such terms and conditions.

\_\_\_\_\_  
Signature of Owners/Residents

\_\_\_\_\_  
Authorised Signature of  
Contractor and Company's Stamp

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

**For Officials Use**

Deposit Cash / Cheque No: \_\_\_\_\_

Amount: \_\_\_\_\_ Date: \_\_\_\_\_

Receipt No: \_\_\_\_\_ Issue By: \_\_\_\_\_

**Refund Deposit**

Receipt / Cheque No: \_\_\_\_\_

Name of Recipient: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date