



MOVE-IN CLEARANCE FOR TENANT/S

To : **PROPERTY MANAGEMENT OFFICE**

Date :

TO BE ACCOMPLISHED IN 3 COPIES - 1 FOR REQUESTOR / 1 FOR PROPERTY MANAGEMENT OFFICE / 1 FOR SECURITY

This is to formally inform you that Mr./Ms./Company Name _____

is moving-in to my Unit (Tower ____, Unit _____) on _____, 20____.

Relevant to this, we have complied to the following requirements for their move-in:

- | | |
|--|--|
| <input type="checkbox"/> Pay all Accountabilities (Good Standing) | <input type="checkbox"/> Updated Information Sheet of Unit Owner/s or SPA |
| <input type="checkbox"/> Submit Notarized Copy of the Lease Contract | <input type="checkbox"/> Ensure to have Fire Extinguisher/s in the Unit. |
| <input type="checkbox"/> Submit Resident Information Sheet for Tenants | <input type="checkbox"/> Checked Sprinkler Heads and Smoke Detector by OIC |
| <input type="checkbox"/> Orientation of House Rules & Regulations | <input type="checkbox"/> Others : Photocopy of Tenant/s I.D. (Government Issued) |
| | Foreigners : Photocopy of Passport |

Please charge the following under my tenant's account:

Bills Released By Administration Office	Remarks by Engineering and/or Cashier
<input type="checkbox"/> Condominium / Parking Dues	
<input type="checkbox"/> Water	Reading (CUM):
<input type="checkbox"/> Electricity	Reading (KWHR):
Others:	
<input type="checkbox"/> Amenity/ies Use	
<input type="checkbox"/> Violation Ticket	
<input type="checkbox"/> Please Specify: _____	

Note to the owners: Collection of assessment/s by Condo. Corp. is just an accommodation. As such, non-payment by the tenant for the said accountabilities including penalties & other charges shall be paid by the owner.

Note that our tenant/s whose signature appears below are allowed to sign the following forms on our behalf:

- | | |
|---|---|
| <input type="checkbox"/> Work Permit (Minor Works Only) | (Note that our unit is ___ Furnished ___ Unfurnished ___ Semi furnished) |
| <input type="checkbox"/> Amenities Room Reservation | <input type="checkbox"/> Gate Pass for INCOMING Items Only (Papasok lang po ng Building/Unit) |
| <input type="checkbox"/> Concern Slip | |
| <input type="checkbox"/> Others: _____ | |

For OUTGOING Items (Palabas po ng Building/Unit), the Gate Pass should be signed by the Unit Owner/s or representative with SPA

For easy coordination, may we request both the owners / representative with SPA and tenant to indicate their complete email address, mobile and land line numbers in the information sheet.

Move-out form, requirements, and gate pass should be accomplished at least 2 weeks prior to actual move-out, **MOVE OUT FORMS and GATE PASS MAY ONLY BE SIGNED DURING OFFICE HOURS.**

Please Print Name and Sign - Tenant/s

Please Print Name and Sign - Unit Owner/s

Noted by:	Approved by:	Safety & Security Monitoring by:
BILLING AND COLLECTION	CHIEF/PROPERTY ENGINEER	COMPLEX/PROPERTY MANAGER
		SECURITY-OIC