

THE SOVEREIGN

S I N G A P O R E

FORM C

**THE SOVEREIGN
RENOVATION APPLICATION & APPROVAL FORM**

Unit No: _____

Contact No.: _____

Name of Subsidiary Proprietor: _____

Contractor's Information

Company Name and Address : _____

Name of Contact Person/s : _____

I/C of Contact Person/s : _____

Contact No.: _____ (Office) _____ (Handphone)
_____ (Fax)

(Please tick in the appropriate box)

- | | | |
|--------------|--|--------------------------|
| Attached are | 1) Details of the renovation to be carried out | <input type="checkbox"/> |
| | 2) Schedule / programme of the renovation | <input type="checkbox"/> |
| | 3) Drawing plans | <input type="checkbox"/> |
| | 4) Approvals from relevant authorities | <input type="checkbox"/> |
| | 5) Any other documents | <input type="checkbox"/> |

Commencement Date – Completion Date : _____

Duration of Work: _____ Extension of Work (if any): _____

Hacking Period: _____

Description of Work: ***(Please fill-up the attached Appendix A)*** _____

I/We agree to the following:

- (1) pay the required deposit and/or administration fee (non-refundable) as stated below;
- (2) ensure full compliance to Section 3 of MCST 1941's By-Laws; and
- (3) indemnify the Management Corporation against :-
 - (i) the cost of making good damage to common property and removal of debris left on common property.
 - (ii) any legal proceedings or suits arising from such works regardless of whether or not it has risen from the negligence of the owner, contractor or any of their helpers or agents.

Personal Data Protection ACT (PDPA) Compliance. By providing the information contained in this form, you agree and consent to Management and its authorized representatives and /or Managing Agent collecting, using and sharing the information within the context of this application.

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In the event of any disagreement, the decision of the Management shall be final and conclusive and the Contractor shall be bound by the Management’s decision. The deposit shall be refunded free of interest after the Management is satisfied that there is no damage caused to the common property.

We acknowledge that notwithstanding any approval granted by the MCST for the stipulated renovation to be carried out, it is still our responsibility to seek relevant professional advice as well as to obtain relevant statutory authorities’ approval before carrying out the renovation. We will undertake to provide full and total protection in the common property, lift, car, panel, floor and lobbies with canvas padding when transporting materials, etc.

Signature of Subsidiary Proprietor

Signature of Contractor Company’s Stamp

Date: _____

Date: _____

*NB: The Security Deposit will be released only when the Management is satisfied that the renovation has been satisfactorily discharged upon checking.

Administration Fee (Non-refundable) & Security Deposit (Refundable) Payable

Payments are to be made by cheque payable to “Mgt. Corpn. ST Plan No. 1941”.

Less than 30 days renovation	\$NIL	Admin Fee
More than 30 days and less than 80 days renovation	\$200	Admin Fee
More than 80 days renovation	\$200 + \$500	Admin Fee
Noisy work more than 20 days	\$500 per day	Admin Fee
Noisy work not exceeding 20 days	\$1000	Security Deposit
Noisy work more than 20 days	\$1000	+ Security Deposit
	\$1000	
Renovation less than 40 days in aggregate with noisy work in aggregate not more than 10 days		subsequent renovation permitted after 6 months
Renovation more than 40 days in aggregate with noisy work in aggregate not more than 10 days		subsequent renovation permitted after 12 months

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For Official Use Only

Type	Received By	Date Received	Approval Given By	Deposit Received By	Date Returned	Received By (Signature & Name)
Initial Security Deposit \$1000 (Cheque No. _____)						
Additional Security Deposit \$1000 (Cheque No. _____)						
Admin Fee \$200 (Cheque No. _____)						
Additional Admin Fee \$500 (Cheque No. _____)						

Please NOTE: Upon completion, please call the Management office at 6440 7185 or 6440 5647 or Security at 6440 1548 for a joint inspection, so that the deposit cheque can be released.

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CERTIFICATE OF COMPLETION / DISCHARGE

Unit No: _____

Completion Date: _____

Defects / Irregularities

Locations / Description

1. Debris not removed

2. Dirtied areas

3. Damaged walls

4. Damaged floors

5. Damaged lifts

6. Damaged electrical installations

7. Damaged landscape

8. Damaged plumber boxes

9. Others

We have jointly inspected the premises and agreed to the remarks stated above. The following damages to the common property have arisen and/or the following cleaning up/removal of debris has to be carried out:

We agree that in view of the above defects/irregularities, a sum of \$ _____, payable to "Mgt. Corpn. ST Plan No. 1941", will be deducted from the security deposit and the remaining sum of \$ _____ will be refunded to _____.

Name/Signature of Contractor

Name/Signature of MCST1941's staff

Date: _____

Date: _____

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