## **THE SOVEREIGN**

## **PURCHASE OF LIFT'S ACCESS CARD**

l,	of unit no	). #	hereby would like to
purchase additional lift's			
No. of cards purchased		Applicant Contact No	:
Amount paid	-	Received by:	
Signature of Applicant			Date
I,the following items:	owner / tena	ant unit no. #	have received
PROXIMITY LIFT ACCE	SS CARDS		
Quantity :			
Cards serial no.:			
Owner / Tenant's Signat	ure :		
Date :			

**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.