Knight Frank

Request for refund OF DEPOSIT

Site Name: _____/MCST _____ Block_____ Unit _____

☐ Owner ☐ Tenant ☐ Contractor ☐ Others

Contact Details _____ (Mobile) _____ (Home) _____ (Email)

*Cheque issued to: _____

(Please write the Payee Name [name as in bank account] in block letter for issuance of refund cheque)

*** The name of cheque issued to should match with receipt name, if not please photocopy claimant's identity document**

S/N	Description	Amount ($)	Receipt Number	Receipt Date

Remarks: _____

_____

I hereby request for the refund of the above deposit(s) and aware that the refund of the deposit will be processed as per the MCST payment cycle in the form of cheque upon complete submission of the original receipt and all other relevant documents.

By filling up and submitting this form, I consent to the collection of my personal data and its use by the MCST and its agents for the purpose of this application. The MCST is entitled to retain the information for audit purposes.

_____ _____ _____

Name of Claimant | Signature of Claimant | Date

TO BE COMPLETED BY MANAGEMENT OFFICE

☐ Approved upon verification of no damage was caused to the common property of the above Site.

☐ Please deduct a sum of S$_____ and refund the balance of S$_____ due to the following damage(s)_____

_____

_____

Verified by _____ Approved by _____ Date: _____

(Name & signature of CM) (Name & Signature of TM/BUH)

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