

Century Manor

COMPULSORY DOCUMENTS TO ACCOMPANY THIS FORM IF RESIDING INSIDE THE ESTATE:

OWNER: Proof of Address, not older than 3 months (City of Tshwane)
ID Document/s

INFORMATION FORM														
REGISTERED OWNER'S DETAILS														
Stand Number:						Street Name:								
Full Name:						ID:								
Postal Address:														
Cell:						Work:								
Home:														
Email address:														
ID of Registered owner:														
SPOUSE / NEXT OF KIN														
Full Name:						ID:								
Cell:						Work:								
Email address:														
TENANT'S DETAILS (MOVE IN CONSENT FORM TO BE COMPLETED AND ATTACHED)														
Full Names:														
Cell:						Work:								
Email address:														
Number of people to reside in unit:														
Date of occupation:														
TELEPHONE NUMBER TO BE PROGRAMMED INTO ACCESS CONTROLL SYSTEM FOR VISITORS TO GAIN ENTRY														
1. Name:						Cell nr:								
2. Name:						Cell nr:								
3. Name:						Cell nr:								
RESIDENTS VEHICLE DETAILS														
Color of Motor Vehicle			Make/Model of Vehicle				Vehicle Registration Number							
DOMESTIC WORKER														
Full Name:														
ID number (Please attach copy of ID):														
Full Time (Stay on premises)						YES			NO					
Part Time	MO		TUE		WE		THUR		FRI		SAT		SUN	
	N		S		D		S				T			
INDICATE WHICH DAYS DOMESTIC WILL BE ON THE PREMISES														

SIGNED OWNER

DATE

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COMPULSORY DOCUMENTS TO ACCOMPANY THIS FORM IF RESIDING INSIDE THE ESTATE:

TENTANT: Proof of Address (City of Tshwane)
ID Document/s
Copy of Rental Agreement

MOVE IN CONSENT FORM	
TENTANT DETAILS	
Full Name:	ID:
Spouse:	ID:
Stand nr:	Street name:
Number of people to reside in the unit on permanent basis:	
Cell nr:	Work nr:
Spouse Cell nr:	Work nr:
Email:	
Date of occupation:	

I, _____ the owner of Stand _____ Century Manor Estate will be renting out my property to the above-mentioned tenant (**dates as per rental agreement attached**)

FROM:

D	D	M	M	Y	Y	Y	Y

TO:

D	D	M	M	Y	Y	Y	Y

Details of Rental Agency (If Applicable)	
Name of Rental Agency	
Name and Surname of Responsible Agent	
Cell number	
Work number	

DECLARATION BY CENTURY MANOR OWNER

1. I declare that the information given is to the best of my knowledge correct.
2. I further declare that I already have or will, before the tenants move into CENTURY MANOR ESTATE, furnish them with a copy of the Code of Conduct and Estate Rules and specifically inform them to take note of important information that is applicable to their initial occupation;
 - a. Restrictions regarding the keeping of pets;
 - b. Restrictions pertaining to neighborliness & rubbish;
 - c. Access control measures.

Information provided here will be treated as confidential but may be shared with entities like the Estate Manager, Board of Directors and security to execute their duties.

Thus, done and signed **at** _____ **on this** _____ **day of** _____.

SIGNED

FULL NAME AND SURNAME

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ACCESS APPLICATION FORM

STAND NR:

A RESIDENT APPLICATION: FINGERPRINT SCAN BOOM GATES

Name Surname	Signature
1.	
2.	
3.	
4.	

B MINOR APPLICATION: FINGERPRINT SCAN TURNSTILE

Name Surname	Guardian Signature
1.	
2.	
3.	
4.	

C DOMESTIC APPLICATION: FINGERPRINT SCAN TURNSTILE

Name Surname	Signature
1.	

D APPLICATION FOR TAGS (Please sign terms and conditions on Tags as setout below)

Name Surname	Stand Number	Serial Number
1.		
2.		
3.		
4.		
Reason for issuing tag to resident		
1.		
2.		
3.		
4.		

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BROKEN TAGS, RE-PROGRAMING OR THE RE-ACTIVATION OF TAGS

State either "Broken", "Re-programming" or "Re-activation" in the Reason(s) section applicable to the tag. Tags for re-activation or programing must be handed in at the security office in a sealed envelope.

TERMS

1. Applications may be denied, or access may be revoked if any information provided was found to be inaccurate or not up to date.
2. Provide complete and readable information. Filled in application form can be handed in at clubhouse office (in a sealed envelope) or emailed to admin@century-manor.co.za. Sealed envelope must have owner/resident name and stand number written on before handing in at estate clubhouse office.
3. Tags for reprogramming, servicing or reactivation must be handed in at clubhouse office (inside sealed envelope).
4. Tags to be collected from clubhouse office, as per appointment
5. Issuing of Security tag costs R150 (subject to change) per tag.
7. Cost will be debited to the owner's Pretor Levy account.
8. Please allow three working days for the processing of application.
9. For security purposes a Tag will expire (be disabled) if inactive (not used) for a period longer than 30 days.
10. Information provided here will be treated as confidential but may be shared with entities like the Estate Manager, Board of Directors and security to execute their duties.
11. **NB: Due to COVID-19 we appeal to the applicant to submit their forms with supporting documents via email as listed above.**

DECLARATION

I, the applicant, hereby declare that I am familiar with the latest version of the CENTURY MANOR ESTATE Code of Conduct and Estate Rules. I further declare that all the information contained in this application is correct on the date of application and that I will, in writing, inform the CENTURY MANOR ESTATE HOA via Pretor of any changes in the information provided on this form within three working days of the change occurring.

RE-APPLICATION FOR TAG/S (Please sign terms and conditions on Tags as setout below)

Name Surname	Stand Number	New Serial Number
1.		
2.		
3.		
4.		
Reason for issuing tag to resident		
1.		
2.		
3.		
4.		

SIGNATURE OF APPLICANT

DATE