

Forms & Annexure

 **ireo**™
uptown
Home to young dreams

ANNEXURE - 1

RESIDENT INTRODUCTION



Serial No. IREO-UP/ _____

1. Name of Owner / Occupant:	AFFIX RECENT PASSPORT SIZE COLOUR PHOTOGRAPH HERE																																																	
2. Father's Name:																																																		
3. Marital Status:																																																		
4. Nationality:																																																		
5. Blood Group:																																																		
6. Building Number:																																																		
7. Apartment No.: _____ Floor: _____																																																		
8. Type of Apartment: 2BHK / 3BHK / 4BHK																																																		
9. Super Built up Area: _____ Square Feet																																																		
10. Contact No. Land Line: _____ Mobile: _____																																																		
11. Email ID: _____																																																		
12. Family Particulars:																																																		
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">SR. NO.</th> <th style="width: 30%;">NAME</th> <th style="width: 5%;">SEX</th> <th style="width: 5%;">AGE</th> <th style="width: 15%;">RELATIONSHIP</th> <th style="width: 15%;">MOBILE NO.</th> <th style="width: 15%;">BLOOD GROUP</th> </tr> </thead> <tbody> <tr><td style="text-align: center;">1</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">2</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">3</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">4</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">5</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td style="text-align: center;">6</td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>	SR. NO.	NAME	SEX	AGE	RELATIONSHIP	MOBILE NO.	BLOOD GROUP	1							2							3							4							5							6						
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4																																																		
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6																																																		
13. Occupation : Service / Business / Retired / Consultant / Others																																																		
14. Nature of Work : Govt. / Semi Govt. / PSU / Private /																																																		
15. Do you possess arms : Yes <input type="checkbox"/> No <input type="checkbox"/>																																																		
If Yes, Please give details :																																																		
16. Vehicle Details:																																																		
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Serial No. IREO-UP/ _____

17. Your Passport Details:	No.:	Validity:	<input type="text" value="DD"/>	<input type="text" value="MM"/>	<input type="text" value="YYYY"/>
	Issuing Office:	Country:			
18. Office Address:					
Police Station:					
City:		State:	PIN:		
19. Permanent Address:					
Police Station:					
City:		State:	PIN:		
20. Is there Physically Handicapped member in family:		Yes <input type="checkbox"/>	No <input type="checkbox"/>		
If yes, please give details:					
21. Is there any member suffering from ailment which needs critical care and emergency medical services					
Yes <input type="checkbox"/>		No <input type="checkbox"/>		If yes, please give details:	
22. Family Doctor Details (Optional):					
This is to certify that all the information furnished above are true and correct to the best of my knowledge and belief.					
			Signature of Occupant		
Date					
Place					

NOTE:

1. Two copy of additional passport size colored photographs of the occupant should be submitted along with this application.
2. Attested Photocopies of Identity proof or any certificate obtained from local authorities.

ANNEXURE - 2

ID CARD REQUISITION FORM



Serial No. IREO-UP/ _____

1. Name of Applicant:		AFFIX RECENT PASSPORT SIZE COLOUR PHOTOGRAPH HERE
2. Date of Birth:		
3. Age:		
4. Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		
5. Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorce <input type="checkbox"/> Widow		
6. Blood Group:		
7. Father's / Husband's Name:		
8. Present Address:		
		Police Station:
City:	State:	PIN:
9. Permanent Address:		
		Police Station:
City:	State:	PIN:
10. Resident's Name: Mrs./ Ms./Mr.		
11. Resident's Address:	Building	H. No.
12. Applicant will stay with Occupant: Yes <input type="checkbox"/> No <input type="checkbox"/>		
13. Category Applicant: Driver <input type="checkbox"/> Care Taker <input type="checkbox"/> Assistant <input type="checkbox"/> Nurse <input type="checkbox"/> Attendant <input type="checkbox"/> Domestic Help <input type="checkbox"/>		
Others (specific category)		
14. Photo Identity Proof: Voter ID <input type="checkbox"/> Adhaar Card <input type="checkbox"/> PAN Card <input type="checkbox"/> Driving License <input type="checkbox"/> Passport <input type="checkbox"/>		
Bonafide Resident Certificate <input type="checkbox"/> Ration Card Affidavit with Magistrate <input type="checkbox"/>		
Any Govt. ID card <input type="checkbox"/> Any other:		
15. Driving License Details: No.:		Validity: DD MM YYYY
Issuing Authority:		
16. Passport Details: No.:		Validity: DD MM YYYY
Issuing Office:		Country:
17. Legal Case registered/ Pending: Yes <input type="checkbox"/> No <input type="checkbox"/>		
If Yes (give details):		

Serial No. IREO-UP/_____

18. Finger Prints:					
HAND	THUMB	INDEX	MIDDLE	RING	SMALL
Left Hand					
Right Hand					
Date:				Signature of Resident	
Date:				Signature of Applicant	
REMARKS BY ESTATE OFFICE					
Checked and Verified by Security Officer:					
Date: <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YYYY"/>				Signature of Security Officer	
Approved <input type="checkbox"/> Not Approved <input type="checkbox"/>					
Remarks:					
Date: <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YYYY"/>				Signature of Estate Manager	
IDENTITY CARD ISSUE DETAILS					
Temporary ID card No.:			Validity: <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YYYY"/>		
Received By Applicant		Handed Over by Security/Admin			
Permanent ID Card No.:			Validity: <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YYYY"/>		
Received By Applicant		Handed Over by Security/Admin			

NOTE:

- Two copy of additional passport size colored photographs of the applicant should be submitted along with this application.
- Attested Photocopies of identity proof or any certificate obtained from local authorities. In case the applicant cannot produce any of the above documents, the residents has to give an affidavit with under taking the responsibility of the applicant.

ANNEXURE - 3

APPLICATION FORM FOR CAR PARKING RFID / STICKER



Serial No. IREO-UP/_____

OWNER DETAILS

Name:

Tower Name:

Flat No.:

Contact Details:

CAR DETAILS	Registration Number	Car Model	Type of Vehicle	Vehicle Colour	Insurance Number
1					
2					
3					
4					
5					

FOR CC OFFICE USE

Please issue one / two car RFID / sticker for Mr./Mrs.

at Ireo Uptown.

Tower Name:

Flat No.:

Parking slot number:

Authorised Signature:

Name:

FOR SECURITY USE

The car parking RFID / sticker number

issued for Parking at Ireo Uptown

Security Officer Signature:

Name:

DECLARATION



I, the undersigned hereby declare my car details for Ireo Uptown Security process. I agree to abide by the following rules and regulations:

1. The car sticker issued for security reasons will appear on the front left top corner of the car wind shield. If for any reason the car is disposed off, this sticker must be removed and returned to the Security office before disposal.
2. The entry and exit of my car will be tracked and recorded as per the Ireo Uptown security norms.
3. The car will undergo security checks as and when required.
4. No car registered in my name will park anywhere in the complex other than in the allotted parking spaces and in the proper manner.
5. No maintenance / repairs to the car other than in emergency will be carried out in the society premises.
6. I will abide by the rules for car owners as introduced by Security in the interests of the society from time to time.

I am aware this process is in the interest of Ireo Uptown Resident's security and I shall extend my full co-operation by observing the security norms.

FLAT / CAR OWNER SIGNATURE

ANNEXURE - 4

PET REGISTRATION FORM



Serial No. IREO-UP/ _____

1. Name of Occupant:			
2. Occupant's Address: Building Name:		Apartment No.:	Floor:
3. Contact Number: Land Line:		Mobile:	
4. Details of Pet:			
4.1. Type		Breed	
4.2. Size		Color	
4.3. Age		Sex	
5. Month of Last Vaccination:			
6. Types of Vaccinations:			
7. Veterinarian's Name:			
8. Veterinarian's Address:			
9. Alternate Care in case of emergency:			

UNDERTAKING

This is to certify that my pet will always be kept under control and will not cause nuisance or danger to other occupants. Pets will be leashed during the movement in public area and any soiling will be immediately cleaned by owner.

Date:

Signature of Occupant

REMARKS BY ESTATE OFFICE

Checked and Verified by Security Officer:	
Date: DD MM YYYY	Signature of Security Officer
Approved <input type="checkbox"/> Not Approved <input type="checkbox"/>	
Remarks:	
Date: DD MM YYYY	Signature of Estate Manager

ANNEXURE - 5

REQUEST-COMPLAINT FORMAT



Serial No. IREO-UP/ _____

Ireo Uptown

Request Slip - Sr. No.

Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Time: _____		Location: _____			
ELECTRICAL	PLUMBING	A/C	I.T.	H/K	SECURITY	PEST	OTHERS
Request: _____							

REQUESTED BY

ATTENDED

STATUS

ACKNOWLEDGED

Remark: _____

ANNEXURE - 6

TEMPORARY PASS FOR WORKING INSIDE THE COMPLEX



Serial No. IREO-UP/_____

Tower Name:		Apartment No.:			
1. Name of Resident:					
2. No. of Persons Seeking Pass:					
3. Duration for Temporary Pass:					
4. Name of Supervisor:					
5. Name of Other Workers:					
	SR. NO.	NAME	ADDRESS	CONTACT NO.	LEFT THUMB IMPRESSION
	1				
	2				
	3				
	4				
	5				
Kindly enclose list of all workers.					
6. Name & Address of Contractor:					
7. Contact No. of Contractor:					
8. Nature of Job: Carpentry <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing <input type="checkbox"/> AC <input type="checkbox"/> Soft Furnishing <input type="checkbox"/> Masonry <input type="checkbox"/>					
Painting <input type="checkbox"/> Interior Decoration <input type="checkbox"/> Others (specify):					
9. Safety Equipments:					
10. Vehicle Details (if any):					
11. Construction Material if any:					
Signature of Resident			Signature of Supervisor		

Serial No. IREO-UP/_____

REMARKS BY ESTATE OFFICE	
Checked and Verified by Security Officer:	
Date: <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YYYY"/>	Signature of Security Officer
Approved <input type="checkbox"/> Not Approved <input type="checkbox"/>	
Remarks:	
Date: <input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YYYY"/>	Signature of Estate Manager

NOTE:

1. The contractors are to note that once the validity period gets over, no worker or supervisor will be allowed inside the premises without the intimation of the owner.
2. One copy of this pass is always to be kept with the person(s) to whom it has been issued and he / she should produce the same to any of the Security Guards or other authorized persons in the complex on demand.
3. No worker below the age of 18 will be allowed.
4. On National Holidays no work will be allowed.
5. Work timings are from 9:00 AM - 6:00 PM. No heavy work like drilling, hammering, cutting etc. will be allowed from 2:00 PM to 4:00 PM.
6. In case of any alterations of this Pass, kindly refer back to the Estate Manager's Office.



Uptown Condominium Owners Welfare Association
Upper Basement, Tower D, Near Lift Lobby, Ireo Uptown, Sector 66, Gurgaon