## **RESIDENTIAL ACCESS APPLICATION - BIOMETRIC REGISTRATION**



THE DETAILS OF ALL RESIDENTS SEEKING ACCESS INTO THE ESTATE, MUST BE PROVIDED. UPON COMPLETION THIS FORM MUST BE RETURNED TO THE HOA OFFICE.

Owner	NAME OF REGISTERED OWNER  EMAIL ADDRESS OF THE PERSON RESPONSIE  PO BOX SUBURB	SURNAME OF REGISTERED OWNER BLE FOR THE PAYMENT OF LEVY	CODE	CELL HOME WORK	OWNER ID / PASSPORT NUMBE	र 	OWNERS TO COMPLETE ALL SECTIONS INCLUDING TENANT DETAILS (IF APPLICABLE)
Tenant	NAME OF TENANT  EXPIRY/RENEWAL DATE OF LEASE  PO BOX SUBURB	SURNAME OF TENANT  EMAIL ADDRESS	CODE	CELL HOME WORK	MBER / PASSPORT NUMBER		TENANTS TO COMPLETE ALL SECTIONS INCLUDING REGISTERED OWNERS DETAILS
Stand	HOUSE NUMBER STREET NA  A OR B  (Please mark with an X)	ME	STAND NUMBER	A OR B	CRESCENT GLEN  MANOR GARDEN  (Please mark with an X)	S	CLOSE HILLS
rcon Additional Residents		SURNAME  NAME OF PERSON		R / PASSPORT NUMBER	DATE FINGERPRINT  / / / / / / / / FE, HUSBAND, OFFICE, ETC)	/ / / /	RED CARD ISSUED  L NR CAPTURED
Gate Inte	PHONE NUMBERS TO CALL FOR ACCESS  INTENDED MOVE IN DATE:						1 1
DISCLAIMER AND RULES OF CONDUCT  These Rules, which the Directors may change from time to time, have been established in terms of the Articles of Association (AOA) and the Memorandum of Incorporation (MOI) of the Homeowners Association (HOA). They are binding upon all residents in the Estate, as is any decision taken by the Directors in interpreting these rules. The registered owners of properties are responsible for ensuring that members and their families, tenants, visitors, friends and all their employees abide by the Rules. I hereby confirm that I have received, read and understand these rules and will abide by them.							
Note: All information is confidential and will only be used by the Thatchfield Home Owner Association.  I certify that the above information are true and correct.  FOR OFFICE USE:							
	FULL NAME	SIGNATURE	DATE		Apllication Received:  Signature:	/	/