



THE ENCLAVE ALABANG
 Daang Hari Rd., Brgy. Almanza Dos, Las Pinas City
 admin.theenclavealabang@proexcel.com.ph

Form. No. F/R-PX2000-21

MOVE-OUT NOTICE AND CLEARANCE FORM

Lot Owner / Authorized Representative

Tenant / Lessee

Original	Admin Office
Photocopy	Security Guard
Photocopy	Unit Owner/Tenant

Date Prepared: _____

To be requested by the Unit Owner/Tenant at least three (3) days before the actual date of Move-Out

Name of Lot Owner/Tenant	Block	Lot	Parking Slot No.
Move-Out Date	FOR TENANTS/LESSEES		
	Start Date of Lease Contract	End Date of Lease Contract	

ITEMS, FURNITURE AND APPLIANCES TO BE PULLED-OUT

Item No.	Item Description	Unit	Quantity	Remarks

Please use additional sheets if necessary. Items to be brought in after the move-in date should be covered by a Gate Pass.

By signing this Move-Out Notice and Clearance Form, I hereby consent to the collection and processing of my personal data and other individuals identified herein, in accordance with such Privacy Policy as may be adopted by The Enclave Alabang and the Data Privacy Act of 2012. I further agree to be contacted by the representatives of The Enclave Alabang regarding any matter relating to my residence in the subdivision as well as on latest developments in The Enclave Alabang. I signify my conformity to the foregoing and certify that all information provided above are true and correct.

Requested by:

(FOR LEASED UNITS) Authorized by:

_____ Date _____ Printed Name and Signature of Lot Owner/Tenant

_____ Date _____ Printed Name and Signature of Lot Owner/Authorized Representative

To be filled-out by Property Management		To be filled-out by Accounting Department <i>(indicate if payments are updated)</i>	
Current Reading	Water	Electricity	Monthly Dues
Reading/Activation of Utility Meters by:	_____ / _____ Printed Name and Signature / Date		Water
			Electricity
Checking/Activation of Fire and Safety Equipment by:	_____ / _____ Printed Name and Signature / Date		Others
			_____ / _____ Printed Name and Signature of Accounting Personnel / Date

FOR LEASED UNITS	APPROVED BY:	SECURITY MONITORING
Assisted by:		Actual Move-in Date: _____
_____ / _____ Printed Name and Signature of AUTHORIZED BROKER / AGENT / REPRESENTATIVE	_____ / _____ Printed Name and Signature of BUILDING MANAGER	Time-In: _____
Date: _____	Date: _____	Time-Out: _____
		_____ / _____ Printed Name and Signature of SECURITY PERSONNEL

1. Approved Move-Out Notice and Clearance Form
 2. Updated payments of Association Dues and other assessments
 3. Updated payments of utilities
 4. List of furnished items inside the unit (If applicable)