



FRP-R3

To: The Management,  
Perbadanan Pengurusan Straits View

### RESIDENT'S PARTICULARS

(to be completed by the resident/occupier)

As per Additional By-Laws & The Immigration Act 1959/63 section 55

Unit No. : \_\_\_\_\_ Email Add. : \_\_\_\_\_ Tel No. : \_\_\_\_\_ Hand Phone : \_\_\_\_\_

Status of Occupier:

Registered Owner     Tenanted/Registered Occupier     Holiday Home     Not Occupied

Correspondence Address : \_\_\_\_\_

Next of Kin / Emergency Contact : \_\_\_\_\_

No.	SECTION A : Registered Occupier's Name	Age	Occupation	Nationality	I/C or Passport No.	Visa No.	Visa Expiry Date	Work Permit No.	Work Permit Expiry Date	Workplace
1										
No.	SECTION B : Names Of Other Persons Living In The Condominium	Age	Occupation	Relationship With (A)						
1										
2										
3										
4										
5										
6										

**\*Note** : Please submit completed form to the Management Office to ensure uninterrupted access and utilization of facilities.

I declare that the informations given in this form are true to the best of my knowledge and belief.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date