



## FIT-OUT (Renovation) Application Form

1	Particulars of OWNER
Name of Owner	
Unit No.	
Contact Number	
II	Particulars of Contractor (if more than one contractor is engaged, please use separate form)
Name of Company	
Address of Company	
Contact Number	
Person-in-charge	Name Number
Ш	Particulars of FIT-OUT(Renovation) Works
Commencement Date	
Completion Date	
Renovation Items  * Full relevant and Required documents as specified in De Castle royal FIT-OUT rules and regulations must be attached to this application.	
We hereby agree and undertake to ensure that the contractor abides by all rules and regulations as attached and as set out in the Fit-out rules and regulations of De Castle royal.	
Signature of Owner	Date
VI	OFFICIAL USE ONLY
Deposit (\$	) Bank/ Cheque No:
Name of Staff:	Date:
FIT-OUT(Renovation) Deposit Refund	
Received By:	
Cash or Bank/ Cheque No	o.: Date: