



Metro Parking (M) Sdn Bhd

(Company No: 213264-U)
(A Member of Damansara Realty Berhad Group Of Companies)
Sulte 10.2, Level 10, Wisma Chase Perdana, Off Jalan Semantan,
Damansara Heights, 50490 Kuala Lumpur, Malaysia.
Tel: 03-2081 2777 Fax: 03-2081 2778, 03-2081 2779
Website: www.metro-parking.com



Customer Service: customerservice@metro-parking.com / seasonjb@metro-parking.com

Branches:-
Johor Tel: +607-244 9090
Kuantan Tel: +609-513 0007 Fax: +609-513 0017
Penang Tel: +604-236 6190 Fax: +604-236 6193
Labuan Tel: +6087-412 292

SST ID : W-180831015861

- ☐ Tenant ☐ Reserved ☐ Personal
☐ Non-Tenant ☐ Non-Reserved ☒ Company ☐ Temporary ____ month

APPLICATION FOR SEASON PARKING

(Please fill this form completely using BLOCK LETTERS only)

Maklumat ini dilindungi di bawah
Akta Perlindungan Data Peribadi

1. Account Name	:	W O N G L I L I N G (S Y L V I A)
2. NRIC No.	:	9 3 / 0 / 3 - 0 / - 5 9 8 8
3. Company Name	:	A N A D & N O R A I N I
4. Contact Person	:	M S F A R A H I N
5. Correspondence/Office Address	:	S U I T E 8 . 0 / L E V E L 8 K O T A R A Y A O F F I C E T O W E R , P L A Z A K O T A R A Y A J A L A N T R U S 8 0 0 0 J O H O R B A H R U
6. Home Address	:	7 J A L A N U T A M A 2 4 T A M A N U T A M A , P E R A N N E N A 8 / 5 0 0 J O H O R
7. Contact Details.	-Office No	: 0 7 - 2 2 2 0 8 / 1 Ext :
	-H/Phone No	: 0 1 6 - 7 0 7 2 5 4 3
	-House No	:
	-E-Mail Add.	: S Y L V I A @ O H Q D H O R O T A N I . C O M
8. Car Registration No.	:	1) J V A 6 5 0 / 2) /

DETAILS ON PAYMENT

I/We attach here with payment by way of cash / cheque to the value of RM - for the following:-

1. Number of month - Number of access(s)/sticker(s) at RM 200 - 00 per month.
 2. (No.) access card(s) at RM - per card issued to me; or
 3. (No.) sticker(s) at RM per sticker issued to me.

DECLARATION	FOR TENANT CONFIRMATION PURPOSE ONLY
Please note that one month written notice is required for cancellation of parking lot(s). If you fail to give notice of termination, a six (6) month grace period is given for you to submit full document to claim your deposit falling which the company have the right to forfeit your: ☒ 1 months deposit + 1 month rental I have read the terms and condition on the reverse page and I agree to be bound by them. Signature of Applicant : <i>Fom</i> Designation : A C C O U N T Date : 0 7 - 0 1 - 2 0 1 5 Company Stamp & Sign (If paid by company) : <i>[Stamp: ADVOCATE & SOLICITOR]</i>	Name : _____ Designation : _____ Date : _____ Mohamed Shukri Draman Head of Asset Management Iskandar Investment Berhad Building Owner / Manager Stamp & Sign : <i>[Signature]</i>

FOR OFFICE USE ONLY (AREA MANAGER/AREA SUPERVISOR/SEASON STAFF)

SITE: Approved By : _____

Date: [] [] [] [] [] []

OFFICE: Approved By : _____

Date: [] [] [] [] [] []



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☐ Tenant ☐ Reserved ☐ Personal
☐ Non-Tenant ☐ Non-Reserved ☒ Company ☐ Temporary ____ month

FOR OFFICE USE ONLY

CAR PARK :
ACCOUNT NO. :
ACCESS CARD / :
STICKER NO. :
RECEIPT NO. :
EFFECTIVE :
APPROVED :

APPLICATION FOR SEASON PARKING

(Please fill this form completely using BLOCK LETTERS only)

Maklumat ini dilindungi di bawah
Akta Perlindungan Data Peribadi

1. Account Name : N U R U L A M I R A B I N T I N A Z R I
2. NRIC No. : 0 2 0 7 3 0 - 0 8 - 0 5 8 2
3. Company Name : A N A D & N O R A I N I
4. Contact Person : M S F A R A H I N
5. Correspondence/Office Address : S U I T E 8 . 0 1 L E V E L 8 K O T A R A Y A
O F F I C E T O W E R , P L A Z A K O T A R A Y A
J A L A N T R U S 8 0 0 0 0 J O H O R B A H R U
6. Home Address : 1 , J A L A N K E B A N G S A A N 6 2 , T A M A N
U N I V E R S I T I , 8 1 3 0 0 S K U D A I , J O H O R
7. Contact Details. -Office No : 0 7 - 2 2 2 0 8 1 / Ext :
-H/Phone No : 0 1 1 - 1 1 4 1 3 2 6 2
-House No :
-E-Mail Add. : q a h i r a @ a n a d n o r a i n i . c o m
8. Car Registration No. : 1) J W U 3 1 5 0 /
2) /

DETAILS ON PAYMENT

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☒ 1 months deposit + 1 month rental

I have read the terms and condition on the reverse page and I agree to be bound by them.

Signature of Applicant :
Designation : A C C O U N T Y
Date : 2 7 - 0 1 - 2 0 2 5
Company Stamp & Sign (If paid by company) :

FOR TENANT CONFIRMATION PURPOSE ONLY

Name :
Designation :
Date :

Mohamed Shukri Draman
Head of Asset Management
Iskandar Investment Berhad

Building Owner / Manager
Stamp & Sign :

FOR OFFICE USE ONLY (AREA MANAGER/AREA SUPERVISOR/SEASON STAFF)

SITE: Approved By :

Date:

OFFICE: Approved By :

Date: