



Metro Parking (M) Sdn Bhd (Company No.: 213264-U)
 33, Jalan Aliff 4, Taman Damansara Aliff, 81200 Johor Bahru.
 Tel: 07-244 9090 Email: seasonjb@metro-parking.com
 SST ID: W10-1808-31015861



SSP2

MULTIPURPOSE FORM

☒ **Termination**
 (section 1, 2, 4 & 5)

☐ **Hold**
 (section 1, 2 & 4)

☐ **Update**
 (section 1, 2 & 3)

Section 1 [Compulsory]

Car Park JBCC Account No. 1112000397
 Car Registration No. WXG 5934 Access Card / Sticker No. _____

Section 2 [Compulsory]

NRIC / PASSPORT _____ COMPANY NO. _____
 Full Name MOHD ZAIDE L B F N ZAI ZAKRANI
 Gender ☒ Male ☐ Female Marital Status: ☐ Single ☒ Married
 Correspondence Address LEVEL 16 MENARA KOMTAR
 Post Code 80000 City JB State JOHORE
 Contact No. H/P 017-3700710 (H) _____ (F) _____
 E-mail Address Zaide111.Zai.Zakrani@jlandgroup.com.my

Section 3 [Customer Information Update]

Request to Change: _____ Effective Date : ____ / ____ / ____
☐ New Car Park _____
☐ Vehicle No. _____

Section 4 [Suspension or Termination Section]

****For temporary suspension, maximum days for each request is 60 DAYS ONLY.**

Reason Suspension ☐ Maternity ☐ Outstation ☒ Transfer ☐ Others: _____
 Effective Date : 01/03/2025 to ____ / ____ / ____

Section 5 [Refundable Deposit]

Choice of mode of payment ☐ Cash (Applicable to Johor Only) ☐ Cheque ☒ Cash Transfer
 Account number : 1642 2146 7723 Bank MAYBANK

Declarations

I/We hereby declare the above informations are correct.
JLG SERVICES SDN BHD
 200401032141 (670649-T)
 Level 16, Menara KOMTAR,
 80888 Ibrahim International Business District,
 Johor, Malaysia.

Rate Our Service:

- ☐ Excellent
☐ Good
☐ Average
☐ Poor

Signature & Company Stamp

Date 20/02/2025

(Please attach photocopy of I/C and Company Stamp for information only)

FOR OFFICE USE

Requestor Status

☐ Active ☐ Privilege ☐ Co's Groups
☐ In-active ☐ Corporate

New Account No. _____

Locking Update

Date Locked ____ / ____ / ____

Re-activation date ____ / ____ / ____

By: _____

By: _____

Access Card / Sticker Update

Access Card / Sticker Status:

☐ Returned ☐ Not returned
☐ Lost ☐ Damaged

Received by:

☐ Head Quarters
☐ Site Office

By (Authorised Person): _____

Date Received ____ / ____ / ____

Replacement Card:

☐ No ☐ Yes ☐ New Card _____

Payment (Penalty / Additional Dep / Renew / Others):

Receipt No.: _____ RM: _____

Deposit Status

☐ Refunded ☐ Not Refunded
 Deposit (RM) : _____
 Advance Fees (RM) : _____
 Penalties (If Any) : _____
 Total Refund : _____

Refund Information

☐ Cash ☐ Cheque ☐ Cash Transfer
 Ref Bank _____
 Ref RD _____

Authorised P.I.C. _____