



Metro Parking (M) Sdn Bhd

(Company No: 213264-U)

(A Member of Damansara Realty Berhad Group Of Companies)
 Suite 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

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 : REUBEN KONG PAEN
2. NRIC No. : 020228-14-0789
3. Company Name : AATA
4. Contact Person :
5. Correspondence/Office Address : NO. 17-01, JALAN TERMINAL 1,
81400, SENAI, JOHOR
6. Home Address : 2820, JALAN MERBAU 8, 81000, KULAI
7. Contact Details. -Office No : -
 -H/Phone No : 016-616-8797
 -House No :
 -E-Mail Add. : rkpilofcha@gmail.com
8. Car Registration No. : 1) VHH4172 / 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 - 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

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. Failing 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 :
 Designation : ANSTRUCTOR
 Date : 05-02-2026

Company Stamp & Sign
 (If paid by company)

FOR TENANT CONFIRMATION PURPOSE ONLY

Name :
 Designation :
 Date :

Building Owner / Manager
 Stamp & Sign :

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

SITE: Approved By :

Date:

OFFICE: Approved By :

Date: