



Metro Parking (M) Sdn. Bhd. No. 0655

(Company No. 213264-U)

APPLICATION FOR SEASON PARKING

(Please fill this form in block letter)

ACC. No.

COMPANY ACCOUNT (Tenant ☐ / Non-tenant ☐ Car Park: _____

1. Company Name : _____
2. Office Address : _____
3. Office Tel No. : _____ Ext No. : _____ Fax No. : _____
4. Contact Person : _____
5. Car Registration No : a) _____ / _____ c) _____ / _____
b) _____ / _____ d) _____ / _____
6. Commencement Date : _____ / _____ / _____

Post Code: _____

PERSONAL ACCOUNT (Tenant ☐ / Non-Tenant ☐ Car Park: _____

1. Name : Doi Wei Keat. (Sesh and General Surgeon, upper GI, GEH)
2. Company Name : _____
3. Office Address : _____
4. Office Tel No. : 012-2198345 Ext No. : _____ Fax No. : _____
5. House Address : No. 20 Lorong Buntari 4, Taman Buntari.
6. House Tel No. : _____
7. Car Registration No : a) SYJ 9350 / SAC 6362F
8. Commencement Date : 1 / 9 / 2024

Post Code: _____

Fax No. : _____

Post Code: 88500

I/We have read the terms and conditions overleaf and I/we agree to be bound by them.

Signature of Applicant / Authorised Officer: DR OOI WEI KEAT Designation: _____

Company Stamp: _____ Date: 1/8/2024.

* Cheque should be made in favour of Metro Parking (M) Sdn Bhd and crossed.

For enquiries please call or come personally to : **METRO PARKING (M) SDN. BHD.**
KPJ SPECIALIST HOSPITAL, LOT NO. 2,
OFF JALAN DAMAI, LUYANG, 88300 KOTA KINABALU, SABAH.
TEL: 012-259 7166

FOR OFFICE USE ONLY

1. Total Allocation : _____
2. Total taken up : _____
3. Balance : _____
4. ☐ Temporary Season Parking Monthly / Quarterly
☐ Permanent Season Parking Monthly / Quarterly
5. Card No. : _____
6. Rate : RM _____ per month reserved / non reserved.
7. Total Amount Paid : Season RM _____
Deposit RM _____
Total RM _____

Approved By : New RM 150/month.
effective 1st Sept 2024

MOHAMAD FAIZAL MOHAMED
General Manager
KPJ Sabah Specialist Hospital