## ANNEXURE - D

## MEMBERSHIP ENROLMENT FORM

Date: 23/7/22

To, The President, Gulmohar Welfare Association, Survey no. 82/1, Mallapur, Medchal-Malkajgiri District.,

Dear Sir,

I am the owner of flat no.102 in block 'A' in the housing project known as **Gulmohar Residency**, forming part of Sy. No. 19, Mallapur Village, Uppal Mandal, Medchal-Malkajgiri District.

I request you to enroll me as a member of

## **GULMOHAR WELFARE ASSOCIATION**

I have paid an amount of Rs. 50/- towards membership enrolment fees.

I hereby declare that I have gone through and understood the Bye-laws of the Association and shall abide by the same.

I agree to pay maintenance charges from the month of July 2022 at the applicable rate prescribed by the association.

Thank You.
Yours faithfully,
Signature:
Name: Gr. L.N. SASTRY
Address for correspondence:
Mr. G L N Sastry & Mrs. M Prabhavathi
4-7-10/59, Raghavender Nagar, Beside ST Peters Model School,
Nacharam, Hyderabad. 500076
Enclosed: Copy of ownership documents.
For Office Use Only
Receipt no. & date:
Sale Deed doc. no. & date: