## ANNEXURE - D

## MEMBERSHIP ENROLMENT FORM

Date: 30/10/2023

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

Dear Sir,

I am the owner of flat no.505 in block 'D' 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 occlosed 2023 at the applicable rat prescribed by the association.
Thank You.
Yours faithfully, /
Signature:
Name: R. Sughed koma
Address for correspondence:
Mr. Ravuri Susheel Kumar,
Flat No.A-114, Tulip Black Concrette Palazzo,
Raghavendra Nagar, Nacharam, Hyderabad-500 076,
Enclosed: Copy of ownership documents.
For Office Use Only
Receipt no. & date:
Sale Deed doc. no. & date: