## **ANNEXURE - D**

## MEMBERSHIP ENROLMENT FORM

Date: 25 2 2 24

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

Dear Sir,

I am the owner of flat no.306 in block 'G' 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 October 2023 at the applicable rate prescribed by the association.

Thank You.	
Yours faithfully,	
Signature: Seekal.3'A	
Name:  Address for correspondence:  Mr. Sreekar Aslesha Suri & Mrs. Venkata Udaya Lakshmi Suri, 5-2-72/1/B/401, Thirumala Nagar, Moula-ali,Secunderabad-500 040	•
Enclosed: Copy of ownership documents.	
For Office Use Only	
Receipt no. & date:	
Sale Deed doc. no. & date:	