ANNEXURE - D

MEMBERSHIP ENROLMENT FORM

Date: 24/05/2024

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

Dear Sir,

I am the owner of flat no.405 in block 'C' 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

CHI MOHAD WELFADE ASSOC	NATION.	
GULMOHAR WELFARE ASSOC	*	
I have paid an amount of Rs. 50/- towards membership	enrolment fee	S.
I hereby declare that I have gone through and understoo shall abide by the same.	d the Bye-lav	vs of the Association and
I agree to pay maintenance charges from the month of _ rate prescribed by the association.	JULY	2023 at the applicable
Thank You.		
Yours faithfully,		
Signature: R.Pral 16		
Name: Rfrasal Ras		
Address for correspondence		
Mr. Prasad Rao Rayavarapu,		
Flat No. 202, Plot No. 63, Meghana Enclave, Jawahar Nagar, Moula-ali, Secunderabad-500		
Enclosed: Copy of ownership documents.		
For Office Use Only	E =	
Receipt no. & date:		
Sale Deed doo no & date:		