## ANNEXURE - D

## MEMBERSHIP ENROLMENT FORM

Date: 22/08/2024

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

Dear Sir,

I am the owner of flat no.404 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

## **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-2023 at the applicable rate prescribed by the association.

Thank You.
Yours faithfully,
Signature:
Name:
Address for correspondence:
Mr. Nilesh Kumar & Mrs. Sonali,
Flat No. A-301, Mayflower Grande,
Mallapur-500 076
Enclosed: Copy of ownership documents.
For Office Use Only
Receipt no. & date:
Sale Deed doc. no. & date: