ANNEXURE - D

MEMBERSHIP ENROLMENT FORM

Date: 30/1/25

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

Dear Sir.

Thank You.

I am the owner of flat no. 606 in block H 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 Aug 2024 at the applicable rate prescribed by the association.

Yours faithfully,

Signature: July Morika I at

Name:

Address for correspondence:

Mr. Ashish Kumar Sinha & Mrs. Monika Lal, No: 4-7-102/52, 1st Floor, Sai Enclave Colony, Habsiguda, Hyderabad-500 007

Enclosed Copy of ownership documents.

For Office Use Only	
Receipt no. & date:	
Sale Deed doc. no. & date:	