

ANNEXURE - D
MEMBERSHIP ENROLMENT FORM

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

Date: _____

Dear Sir,

I am the owner of flat no. 304 in block E 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 2025 at the applicable rate prescribed by the association.

Thank You.

Yours faithfully,

Signature: Latifa

Name: Latifa Mohammed

Address for correspondence:

Ms. Latifa Mohammed,
A-501, Trimbak Tower, Plot-86, Sector-15,
CBD Belapur, Navi Mumbai, Thane-400 614.

Enclosed: Copy of ownership documents.

For Office Use Only

Receipt no. & date: _____

Sale Deed doc. no. & date: _____