

# MOVING IN / MOVING OUT FORM

Rockpool SP 60850



Please complete all details below and email this form to: [rockpool@nsbm.com.au](mailto:rockpool@nsbm.com.au)

## RESIDENT DETAILS

|                 |  |
|-----------------|--|
| Resident Name   |  |
| Unit/Lot Number |  |
| Phone Number    |  |
| Email Address   |  |

## MOVE DETAILS

☐ Moving In ☐ Moving Out

|                    |  |
|--------------------|--|
| Moving Date        |  |
| Preferred Time     |  |
| Estimated Duration |  |

## REMOVAL COMPANY (If Applicable)

|                |  |
|----------------|--|
| Company Name   |  |
| Contact Person |  |
| Phone Number   |  |

## VEHICLE DETAILS

|                             |  |
|-----------------------------|--|
| Vehicle Registration Number |  |
|-----------------------------|--|

Parking Required for Moving Vehicle

☐ Yes ☐ No

## COMMON PROPERTY PROTECTION

The resident agrees to:

- Protect all common property during the move.
- Use designated lifts and loading areas only.
- Ensure no damage is caused to common property.
- Remove all rubbish and packing materials immediately after the move.
- Comply with all building by-laws and moving procedures.

The resident accepts responsibility for any damage caused during the move by themselves, their visitors, or their removalists.

|                       |  |
|-----------------------|--|
| <b>Bond Amount</b>    |  |
| <b>Receipt Number</b> |  |
| <b>Refund Date</b>    |  |

## RESIDENT DECLARATION

I declare that the information provided above is true and correct. I agree to comply with all strata by-laws, moving procedures, and any conditions imposed by the Owners Corporation or Strata Manager.

|                           |  |
|---------------------------|--|
| <b>Resident Signature</b> |  |
| <b>Date</b>               |  |