

RESIDENT MOVING-OUT FORM

Date	Filed		:						
Name of Outgoing Resident			:						
Addro	ess iı	n Dasmarinas Villag	e :						
Resid	dent's	s Contact No.	:						
Moving-Out Date : Name of Property Owner :									
Owner's Contact No.			:						
					Signa	ature of Re	sident		
I here	eby a	uthorize Mr./Ms				to n	nove out of my		
prope	erty c	on					-		
		Owner's Printed Na	ne & Sig	gnature			Date		
As yo	u pre	pare to move out, plea	ase be av	vare of t	he following	important r	equirements:		
1.		urn of Car Stickers							
	a)	All car stickers must l Please ensure this is				•	our move-out date.		
	b)	If the car stickers are	•				ur sticker/s will not		
		be available for new				•			
2.	Mov	Move-Out Form Submission							
	a)	Form Submission: Pl days before your sch							
		processing and approval.							
	b)	Moving Arrangements: Once the form is submitted, you may proceed with arranging							
		 your mover's activity. Please email the following details to <u>bdmalaga@dva.org.ph</u>: Date and Time: Specify the date and time of the actual move-out. 							
		 Date and Time: Specify the date and time of the actual move-out. Moving Company: Provide the name of the moving company. 							
		 Vehicle Details: Include details of the car or truck being used. (Important: 10- 							
		wheelers and container vans must obtain a trip ticket from the DVA office. The							
		entry fee is Php 5,							
		 Driver's Name: Press 	ovide the	name of	the driver.				
		 Crew Information: 	List the n	ames of	the crew men	nbers who w	ill be handling the		
-		move-out activity.							
3.	Pull	-Out Items List (see at							
		• Please submit a list							
					e that all items	s are account	ed for to avoid any		
		delays during the m	ove-out pr	ocess.					

âî 1417 Campanilla St. Dasmariñas Village Makati City +63 (2) 8843-2262
 dvaadmin@dva.org.ph
 dva.org.ph

LIST OF ITEMS TO BE PULLED OUT

Address:	
Move-Out Date:	_
Date Submitted:	

Instructions:

- Please list all items to be removed from the premises during your move-out.
- Ensure that all items are properly accounted for.
- If necessary, provide a brief description for each item (brand, color, etc.)

No. Item Description	Quantity	Item Description	Quantity
1		11	
0		12	
3.		13	
4			
5			
6			
7			
8		18	
9		19	
10		20	

Prepared by:

Approved by:

Signature of Lessee

Owner's Printed Name & Signature

Checked by:

DVA Security Printed Name & Signature