

Annex 2 –Long Term Visitor Request Form

Employee Information	
Employee's Name:	
Tower Number:	Apartment Number:
Contact Number:	
E-mail:	
Visitor Information	
Visitor's Name:	
Relationship:	
Arrival Date:	Departure Date:
Passport Number (copy of passport attached):	
Declaration	
I confirm that the information I have provided is correct and I understand that my application may not be considered if I have, knowingly, provided any false information. I also take full responsibility for the behavior of my visitors and will bear the cost for any damages incurred in the compound whilst they are residing in the accommodation.	
Signature Date : / /202	
Approval - To be filled by the Facilities Management	
☐ Approved ☐ Not Approved	Name : Date: / /202 Signature :
Reason of rejection :	

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