

SAN LAMEER ESTATE: APPLICATION FOR ESTATE SHUTTLE SERVICES

FORM TO BE COMPLETED BY OWNER/RESIDENT AND NOT EMPLOYEE

<input type="checkbox"/> PRIVATE DOMESTIC WORKER	<input type="checkbox"/> OTHER: _____ (Specify)
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OWNER DETAILS (form to be completed by Owner/Resident and NOT Domestic Worker/Other)

VILLA NUMBER	
NAME & SURNAME OF OWNER/RESIDENT	
CONTACT NUMBER OWNER/RESIDENT	
EMAIL ADDRESS OF OWNER/RESIDENT	

PRIVATE DOMESTIC AND/OR OTHER WORKER'S DETAILS

FULL NAME AND SURNAME							
ID/PASSPORT NUMBER							
Casual (Mark days of entry)	<input type="checkbox"/> Mon	<input type="checkbox"/> Tue	<input type="checkbox"/> Wed	<input type="checkbox"/> Thu	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat	<input type="checkbox"/> Sun
Trips	<input type="checkbox"/> 1 – R20	<input type="checkbox"/> 8 – R150	<input type="checkbox"/> 16 – R250		<input type="checkbox"/> 62 – R450		

	SIGNATURE	DATE
OWNER / TENANT:		
ENROLMENT DONE BY:		