

**VEHICLE TAG
REGISTRATION
FORM**



Stand No

Street No

Please select between the following application types and complete the corresponding Section:

New Resident : Additional Tag: PIN CODE

Tag Lost / Broken:

Registered Owner / Tenant's details:

Name & Surname:

Tag User's details: **Please complete one form for each tag required*

Owner Residing inside the Estate: Owner Residing outside the Estate:

Tenant: Relationship: _____

Name & Surname:

Address:
(If not residing in Mooikloof Glen)

ID Number:

Driver's License Number:

Vehicle Make: Vehicle Model:

Vehicle Colour: Vehicle Reg:

Email Address:

Contact Number:

Lost / Broken Tag Nr: _____ Date Lost / Broken: _____

SECTION A

SECTION B

I hereby accept the terms and conditions governing the Access System and Procedures at Mooikloof Glen Estate. I accept that the access tag/remote control issued to me is not transferable and use of the tag/remote control by any other party is strictly prohibited.

Signed: _____ Date: _____ (DD/MM/YYYY)

Office Use:

Copy of ID & Drivers Received: Approved by Security Director: _____ Date: _____