



EPSOM TERRACE

Vrede Road, Epsom Downs - Bryanston
Estate Management by Van de Sandt Estate Management CC
Anton van de Sandt # 083 787 6336 / AJ@vdsem.co.za

SECURITY GATE AND BURGLAR PROOFING APPLICATION FORM

Please complete this Application form and return to the Estate Manager for processing via fax # 086 607 0963 / e-mail to AJ@vdsem.co.za

Unit number : _____

Resident Name : _____

Contact Particulars : _____

E-mail Address : _____

- 1) The burglar proofing & security gates must be painted black and the same material must be used as those installed throughout the complex i.e. steel.
- 2) The burglar proofing & security gates must be the same shape and design as those installed throughout the complex i.e. the steel must be vertically aligned on the security gate and shaped in blocks for the windows . The specification on the security gate has been attached.
- 3) Resident can contact Micheal on 084 550 9608 for a quote as he has installed most of the gates and bars in the complex and is familiar with the standard. Alternatively residents can contact Jaco from Versatile Gates on 011 418 9960 for a quote.
- 4) The burglar proofing may only be installed on the inside of windows.
- 5) Maintenance of the burglar proofing and security gates are for the owners' account/responsibility. The Body Corporate and the Trustees will not be held responsible for any costs arising from the installation or maintenance of the burglar proofing and security gates.
- 6) In the event of non-compliance of these conditions, and failure to adhere to them for a period of 30 days after written notice, the Trustees or a duly empowered agent will be entitled to rectify the issue in any method as it deems fit and recover the cost of doing so from the owner.
- 7) Permission for the installation of burglar proofing and security gates may only be given by the Trustees in writing, and in doing so they may prescribe any further reasonable conditions. Any permission granted in this way may be revoked at any stage by the Trustees at their discretion.

I hereby agree to these conditions.

Resident Signature : _____ Date: _____

For office use only

Permission granted: YES/NO

Decision Date : _____

Granted by : _____

