



FEDERATION OF APARTMENT ASSOCIATIONS BENGALURU (FAAB)

(Regn. No.DRB-1/SOR/343/2016-17 Dtd. 09.02.2017)

Regd. Office : Flat No.403, ANDES Block, Heritage Estate, Yelahanka, Bengaluru – 560 064.

www.faa-b.org media.faab@gmail.com Tel: 9900050310

APPLICATION FOR MEMBERSHIP

Name of the Apartment Association					
Full Address					
BBMP WARD NO.					
No. Of Units (Flats)					
If Regtd, provide the Registration details.		Regn. Number			
		Date of Regn.			
Details of the Office Bearers of the Association.					
Designation		Name		Phone No.	Email id.
PRESIDENT					
SECRETARY					
TREASURER					
Details of the Representatives nominated to join FAAB					
Designation		Name		Phone No.	Email id.
Interested to volunteer to join various sub- committees -Legal, Media, Technical etc; (Please tick any one)					
Legal	Media	Technical	Awareness	Admin	Content

Declaration:

We, _____, having office at _____ represented by Shri./Smt./Kum. _____, President / Secretary / Treasurer do hereby declare that all the information provided in this application are true to our knowledge and belief. Also, we agree to abide by the bye-laws of FAAB.

Place: Bengaluru

Date:

Signature with seal

Details of Fee Paid:		Cheque No.	
		Date.	
		Drawn on	