

Avonddons Estate

Full-time and temporary Worker Registration (Reg 2)

PARTICULARS OF THE WORKER			
FULL NAMES:			
SURNAME:			
ID/PASSPORT/WORKPERMIT NO:			
HOME ADDRESS:			
EMPLOYMENT STATUS: (Tick relevant block)	Permanent	Temporary	Casual

DAYS OF THE WEEK THE WORKER WILL WORK AT THE STAND BELOW (Tick relevant block)							
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Full time

PARTICULARS OF OWNER / RESIDENT		
Property number:		
Name and Surname:		
Telephone/Cell number:		
I have attached a copy of their ID/Passport/Work Permit of employee(s). (Tick the relevant block.)	Yes	No

Undertaking

I am a resident at the abovementioned address.

I will inform the relevant Homeowner Association immediately of any changes to the particulars of the worker.

I will ensure that worker listed above will abide to the Access Control Procedures as per the standard operating Procedures (SOP).

I take full responsibility for such worker while under my supervision and hereby give permission for them to enter/exit the Estate, as required by the Standard Operating Procedures (SOP) for access control.

Signature employer:

Date:

Signature worker:

Date: