



## HAMRIYAH FREE ZONE AUTHORITY

### Agreement For Accommodation Facility

**New**

Name of Company			
License No.		Expiry Dt :	
Address.		Fax :	P.O. Box :
Type of Acco. & Units / Rooms Required.	<b>(Unit) :</b> Max. 6 Person only		
Room No.			
<u>Duration</u> Minimum period: one year	<b>From:</b>	<b>To:</b>	
	Automatically renewable for similar duration unless a termination notice is given one month prior to the expiry of the current duration. Rent for any shortage in notice period shall be payable. Any refund for earlier termination will be at the discretion of HFZA.		
Rent	AED /- ONLY (Maximum One Installments)		
<b><u>Charges Per Month:</u></b> <input type="checkbox"/> A, B, C Blocks = 2000/- <input type="checkbox"/> B TV = 3500/- <input type="checkbox"/> D Block = 1800/- <input type="checkbox"/> E1 & E2 Blocks: 2000/- <input type="checkbox"/> E3 & E4 Blocks: 2000/- <input type="checkbox"/> F Blocks = 2000/- <input type="checkbox"/> P = 1200/- <input type="checkbox"/> G Blocks (Phase II) = 2000/-			

#### **Terms and Conditions:**

1. No unauthorized action/s including cooking and storage of items other than personal belongings of occupants shall be permitted in any part of the accommodation complex. The kitchenettes provided in Senior Accommodation facility are intended for coffee and tea only.
  2. No unauthorized person/non-employee of the Tenant shall be permitted to reside in the accommodation facility.
  3. The occupants shall not create nuisance for the adjoining rooms/in the accommodation complex. Excellent Health and Hygiene practices and decent behavior from all occupants shall be ensured.
  4. Changing allocated room/s without prior permission from HFZA Accommodation Supervisor is not permitted. Each Junior accommodation room will be provided with one toilet.
  5. The Tenant shall be responsible for the ongoing maintenance of allocated rooms and toilets/bath rooms. At the time of returning the facility, the Tenant shall reinstate the facility which shall include painting. Rent shall be payable until such reinstatement is carried out. The relevant form shall be signed by HFZA Supervisor, handing over of the key to the supervisor to inspect the facility shall not be proof of reinstatement or facility handing over.
  6. In case of common room/toilet any case of reinstatement /repairs shall be determined by HFZA according to the number of occupants of such rooms
  7. HFZA reserves the right to take over the accommodation facility on reasonable grounds (including non-occupation of the facility for a period more than 1 month) which shall be communicated to the Tenant in writing.
- HFZA shall have the right to re-possess the facility in the case of non-payment / non-renewal at the cost and consequences to the Tenant.

\_\_\_\_\_  
Company / Tenant

\_\_\_\_\_  
HFZA/Landlord

**Key Received by**