**LAPORAN PENILAIAN *MARCH-IN* DAN *MARCH-OUT* PERUMAHAN KERAJAAN**

**DI BAWAH KAWALAN KEMENTERIAN PERTAHANAN DAN ABDB**

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| **BAHAGIAN 1 – KETERANGAN RUMAH** |
| Nama Penghuni: | Pemeriksaan Masuk Rumah |  |
| Pemeriksaan Keluar Rumah |  |
| Alamat Rumah: | No TS/RS/FS:(Bagi rumah/flat sewa Kerajaan sahaja) |
| Nama TPR:(Bagi rumah/flat sewa Kerajaan sahaja) |  |
|  | Luar Rumah | Bilik Tamu | Bilik Makan | Dapur | Pantri/Stor | Bilik Tidur Utama | Bilik Tidur #1 | Bilik Tidur #2 | Bilik Tidur #3 | Bilik Amah | Bilik Mandi Utama | Bilik Mandi #1 | Bilik Mandi #2 | Bilik Mandi #3 | Lain-lain | **Kod Kondisi:**B=Baik K=KotorH=Hilang T=RosakT=Tercalar P=PecahPP=Perlu PembaikanTB=Tidak Berkenaan |
| Dinding luar |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **Kelengkapan (jika ada)** |
| Siling atap |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | No. | Kond. |
| Atap rumah |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Penghawa dingin |  |  |
| Pagar konkrit |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Pemadam Api |  |  |
| Pintu pagar utama |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Dapur memasak |  |  |
| Jendela |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Peti surat |  |  |
| Tabir/ *blinds* |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Tiang bendera |  |  |
| Lantai |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Pam/Tangki air |  |  |
| Dinding |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Jemuran |  |  |
| Siling dalam rumah |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kipas angin |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lampu dan suis |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Soket/kabel |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sinki dapur |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Kabinet dan kaunter |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | **Perabot (jika ada)** |
| Sinki bilik mandi |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | No. | Kond. |
| Tub dan/atau pancuran mandi |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Set Kerusi Bilik Tamu |  |  |
| Tandas |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Set Kerusi/Meja Bilik Makan |  |  |
| Penggantung tuala |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Meja Bilik Tamu |  |  |
| Penggantung tisu tandas |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Meja kecil |  |  |
| Cermin muka |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Meja Makan |  |  |
| Lain-lain |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Meja Tulis |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Kerusi Tulis |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Almari buku |  |  |
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Katil *(double)* |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Katil *(single)* |  |  |
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**TANDATANGAN PENGHUNI TANDATANGAN PENGHUNI**

**NO: NO:**

**PANGKAT: PANGKAT:**

**NAMA: NAMA:**

**UNIT: UNIT:**

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| **BAHAGIAN 2 - PENGAKUAN PENGHUNI** |
| 1. Saya berjanji akan sentiasa mengekalkan unsur-unsur keselamatan, keamanan dan kebersihan di dalam dan sekitar Kawasan halaman perumahan Kerajaan di bawah kawalan Kementerian Pertahanan dan ABDB.
2. Saya adalah bertanggungjawab keatas semua peralatan dan perkakas kecil/ pembaikan kecil yang kosnya tidak melebihi B$100 bagi setiap kerosakan yang tidak terkumpul.
3. Saya memahami dan berjanji untuk mematuhi semua syarat-syarat dan peraturan seperti yang terkandung didalam “Peraturan Untuk Mendiami Rumah/Flat Sewa Kerajaan Di Bawah Kawalan Kementerian Pertahanan”.

**Pemeriksaan *March-in***

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 Tarikh Tandatangan Penghuni |
| **Pemeriksaan *March-out***

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 Tarikh Tandatangan Penghuni |
| **BAHAGIAN 3 – PENGESAHAN PEJABAT PERUMAHAN YANG MENGAWAL** |
| Saya mengesahkan bahawa disepanjang pengetahuan saya segala keterangan yang diberikan adalah benar dan betul.No/ Pkt/ Nama Penuh PTB Kanan Penguasa Perumahan: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Pemeriksaan *March-in***

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 Tarikh Tandatangan/Cop Jabatan |
| No/ Pkt/ Nama Penuh PTB Kanan Penguasa Perumahan: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Pemeriksaan *March-out***

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 Tarikh Tandatangan/Cop Jabatan |
| **BAHAGIAN 4 – PENGESAHAN TUAN PUNYA RUMAH (Bagi Rumah/Flat Sewa Kerajaan Sahaja)** |
| Saya mengesahkan bahawa disepanjang pengetahuan saya segala keterangan yang diberikan adalah benar dan betul.Nama TPR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Pemeriksaan *March-in***

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 Tarikh Tandatangan |
| **Pemeriksaan *March-out***

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