

Date: \_\_\_\_\_

To: Membership Relations Department

**Request for waiver of \$50 penalty fee for non-return of car park label**

I would like to request for the waiver of the penalty fee for non-return of car park label of vehicle number \_\_\_\_\_ for the following reason:

\_\_\_\_\_  
\_\_\_\_\_

Thank you.

\_\_\_\_\_  
Signature

Name of Member: \_\_\_\_\_

Membership No: \_\_\_\_\_

\_\_\_\_\_  
Approved by:

\_\_\_\_\_  
Joanne Ng  
Membership Relations Manager