

Capital Centre Building Werner List Street P.O. Box 40194 Ausspannplatz

## **TERMS AND CONDITIONS**

- 1. Room numbers and bed allocations will be provided upon check in.
- 2. *Residents will only be able to check in after payment confirmation & acknowledgment of the residence rules and regulations.*
- 3. Access will only be allowed to residence—on presentation of a confirmation of occupancy letter.
- 4. A secure card will be provided upon check in, no duplicates will be allowed.
- 5. In case of lost or stolen cards the resident will be liable for replacement costs.
- 6. An Occupation breakage fees need to be paid before check in.
- 7. Residents are reminded to adhere to all COVID regulations.
- 8. *Residents to sign off an inspection sheet: On date of check in and one day prior to vacating the premises.*
- 9. Residents will also comply to ad Hoc inspections with or without notification.
- 10. Residents agree to be personally liable for all amounts arising from the occupation of the premises.
- 11. In case of Abscondment, penalties and legal repercussions may be introduced.
- 12. No rental or service refunds will be granted after confirmation of occupation.
- 13. Breakage fees will be refunded within 60 days of vacating the premises after deduction of any damage that was caused by the resident during his/her stay at the premises.
- 14. United Africa Hospitality, their Owners, operators, employees' agents and representatives shall not be liable for any loss, damage or destruction to any property whether arising from fire, theft, omissions or any other cause.
- 15. United Africa Group, its subsidiaries, Owners, operators, employees' agents and representatives shall not be liable for any accident, injury or loss of life of any person's resident, visitor or third party.

I hereby irrevocably & unconditionally indemnify and agree to hold harmless United Africa Group and their Subsidiaries, representatives, Directors and Owners in respect of any responsibility/liability as aforesaid.

## DECLARATION

I.

\_\_\_\_\_ ID / Passport No. \_\_\_\_\_

hereby declare that all information given in this application form is true and correct. I further declare that my enrollment shall be subject to the terms and conditions contained in the agreement.

**Applicant Signature** 

## Parent /Guardian Signature

Name: Date

Name: Date: