

**TENANT(S) SEEKING APPROVAL FOR
FOXTEL APPROVAL**

ADDRESS: _____

TENANT: _____

APPROX DATE OF INSTALLATION: _____

REQUESTED LOCATION OF THE FOXTEL POINT(S): _____

(what room, wall etc)

I/We the tenant(s) request to have Foxtel installed as mentioned above.

CONDITIONS OF INSTALLATION

The Owner(s) may accept your request to install Foxtel to the premises based on the following conditions are signed by the tenant(s) and returned to RWR Real Estate prior to the installation.

- Installation is to be carried out by a professional installer.
- Any costs associated to the installation will be paid by the tenant(s).
- Any roof leaks around the installation of the Foxtel dish or by walking on the roof will be repaired by our approved professional roof plumber and at the tenant(s) cost.
- Any damage done to the walls will be patched and repainted by our approved handyman at the tenant(s) cost.
- No conduit is to be run through common walkway areas or external walls without approval of the Owner(s) and strata if applicable.
- No conduit ducting is to be installed to any internal wall without prior approval of the Owner(s)
- The Owner(s) are able to request for the Foxtel dish and points are removed upon vacating the tenancy and the tenant(s) is required to carry out repairs at their own cost and using RWR Real Estates approved contractors.

TENANTS SIGNATURE

SIGNED: _____ DATE: ____/____/____

TENANT NAME: _____

SIGNED: _____ DATE: ____/____/____

TENANT NAME: _____



INSTALLATION ACCEPTED FOR FOXTEL

The Owner(s) have accepted your request for the installation of Foxtel based on the conditions on page 1 are met and the location of the points are:

LOCATION OF FOXTEL POINTS: _____

IS THE REMOVAL OF FOXTEL REQUIRED PRIOR TO VACATING THE PREMISES? _____

Please note, should any charges be associated due to the installation, relocation or removing of the Foxtel will be on charged to the tenant for reimbursement.

AGENTS SIGNATURE

SIGNED: _____ DATE: ____/____/____

TENANT NAME: _____

