



## CHEQUE STOP REQUEST FORM

### Information of Tenant

Date: .....

Contract No. ....

Building No. .... Premises No. ....

Contact No. .... Area .... City ....

Fax No. .... Email .....

### Cheque Detail

Cheque No.	Cheque Date	Bank Name	Cheque Amount

Tenant Comments .....

Tenant Signature .....

Note: Must be inform before 10 days from date of cheque to stop  
otherwise must be cheque must be cleared by bank on date.

Approved ☐

Rejected ☐

Comments .....

Manager Signature