

**Application Form for
Offering Buildings on Lease for the Academic/Student Hostel Use of
Gampaha Wickramarachchi University of Indigenous Medicine, Sri Lanka**

1. Name of the owner :
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2. Permanent address :
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3. Contact number/s : Mobile: Fixed:.....
4. Building location :
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5. Distance from the University:
6. Facilities available:

Sr. No.	Facility	Owners Response	Remarks
i.	Floor area		
ii.	Parking facilities		
iii.	Water supply		
iv.	Sanitary facilities		
v.	Electricity		
vi.	Other infrastructure facilities		
vii.	Expected monthly rental/amount of leased		
viii.	Structural drawings of the building certified by a qualified Chartered Engineer and necessary		
ix.	The property owned by the applicant		

7. Any other Details
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Special Note:

The buildings will be initially obtained for a 02 years duration and may be extended up to another 03 years subject to the requirements of the university, condition of the property, government rules and regulations imposed from time to time and based on the government valuation obtained periodically.

I hereby certify that the above-provided details are true and correct. The submission of this application is subject to the following conditions.

1. I agree to hand over the building according to the university requirements within a maximum of 01 month time after the official notification from the university.
2. I agree to the rate of the monthly rental/lease amount decided based on the Government Valuation.

.....
Signature

.....
Date

Witness

1. Name : Signature :

2. Name : Signature :