



## Application to Install Foxtel (Cable TV Services)

Please complete this application (three pages) to assist in prompt consideration of your request.

Until the application has been completed in FULL and returned to our office, we cannot process your request.

Please ensure that you have reviewed the terms and conditions of this application before signing.

**Please NOTE:** The outcome of this application is subject to the Body Corporate By-Laws and a decision of the Body Corporate Committee.

### Property Details -

Building Name .....

CTS Number ..... Lot Number .....

Property Address .....

Suburb ..... State ..... Post Code .....

### Applicant Details -

Your Status:  
 Owner      Agent on behalf of tenants  
 Agent on behalf of prospective buyers - Settlement Date .....

Your Name .....

Email (required).....

Phone ..... Mobile(required) .....

### Location of the Installation & Specifications

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**Please attach relevant information in a separate document or in the space provided on page 2 of this form - a drawn diagram or attach a photo of the proposed location of the dish (if applicable) or make it clear where any external cables are to be installed and any set course of where such cables will run.**

SIGNED ..... DATE .....

**OFFICE USE ONLY**    Date received: ..... Application Acknowledged: ..... By-Laws Checked: .....

Forward to the Committee: ..... Flying Minutes      Committee Meeting      General Meeting

Approval Granted:    YES      NO      Resolution Date: ..... Filed Date: ..... Staff ID: .....



## ***Application to Install Foxtel (Cable TV Services)***

Please attach a photograph or draw a diagram of the proposed location of the service or hardware if applicable.

Initial: .....



## Terms and Conditions of Foxtel (Cable TV) Installation

1. The Applicant (e.g. owner/tenant/prospective buyer/agent – the person whose name and signature is detailed on attached form) understands and acknowledges that all repairs and maintenance to the Foxtel dish / cabling and all associated fittings will be the sole responsibility to the person who is applying.
2. Any damage whatsoever that may occur to the common property or any surrounding lot due to the installation of the Foxtel dish / cabling will be the sole responsibility of the Applicant ((e.g. owner/tenant/prospective buyer/agent – the person whose name and signature is detailed on attached form) to rectify within seven (7) days.
3. The Applicant (e.g. owner/tenant/prospective buyer/agent – the person whose name and signature is detailed on attached form) acknowledges that the Foxtel dish / cabling will comply with all regulations as set by Local Government / Foxtel Supplier. Should a breach of the by-laws occur, the Applicant acknowledges that they may be requested to remove the Foxtel dish / cabling immediately at the Applicants cost.
4. The Applicant agrees to adhere to any request made by the Body Corporate.
5. The Applicant (e.g. owner/tenant/prospective buyer/agent – the person whose name and signature is detailed on attached form) is aware that the Body Corporate Insurance DOES NOT cover Foxtel dish / cabling and that they will be responsible for their own additional Insurance (if applicable).
6. The Applicant (e.g. owner/tenant/prospective buyer/agent – the person whose name and signature is detailed on attached form) agrees that all external fittings, wiring etc..., will be colour matched (if applicable) to that of the entire building and as such may need to seek approval from the Committee of the Body Corporate in this regard.

FULL NAME: .....

SIGNED: ..... DATED: .....

***Please return your completed form with attached pictures/ diagram to our office:***

***Email: reception@stratamatt.com.au***

***In person or post: 674 Ipswich Road, Annerley QLD 4103***

***Thank you!***