TO: Park Island Transport Co. Ltd(<u>Tel:2946 8899</u> / Fax :2525 5556)

Application for Access to Information of Octopus Concessionary Scheme for Residents of Park Island / Ma Wan Village

	(Name), being the ov	vner of Flat	Floor	Block	, Park
Island,or Floor	No	Ma Wan Vill	age ,request a	ccess to the reg	stered
date of All Octopus (Cards (the name of card)	holder and card	numbers) in t	his unit. It takes	2
working days to veri	fy the relevant record.				
* Please select the w	vay to receive the inforn	aation			
Mail to the addre	ess as above (Park Island	l Residents Only	7)		
Visit our Office					
(Monday-Friday	y: 09:00 13:00 / 14:20-17	:30; Saturday:	09:00 – 13:00))	
∃ By Email:				-	
] Fax :	(Home) or		(Of	fice)	
Owner Name:	Ow	ner Signature:	,		
	(Th	e signature mus	t be same as t	he record kept i	n Office
Contact Telephone N	No.:		_Date:		
For Office Reply					
	of Card Holder	Octopus Caro	l Number	***************************************	
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2.				Owner / Te	
3.				Owner / Te	nant
				Owner / Te	nant
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5.				Owner / Te	
j.				Owner / Te	nant
7.				Owner / Te	nant
		E	on Official Van) L.	
			or Official Use (iniy	
			ndorsed by Park	Island Transport C	omnany Li