VISITOR GATE PASS

Standard Society / Facility Access Authorization Slip

Pass No:	VGP-____-_____	**Date:**	____/____/20__
Time In:	____:____ AM/PM	**Valid Until:**	____:____ AM/PM (Same Day)

Visitor Full Name	_____
Mobile Number	+91 _____ - _____
Representing / Category	_____ (Guest / Courier / Service / Contractor)
ID Verification (Optional)	[ ] Not Required / Walk-in [ ] Verified by Guard (ID Type: _____ Last 4: ____)
Flat / Destination	Tower / Block: _____ Flat / Unit No: _____
Host Resident / Contact	Name: _____ Phone: _____
Purpose of Visit	[ ] Personal Guest [ ] Delivery [ ] Home Maintenance [ ] Official Work

Vehicle Category	**Vehicle Registration No.**	**Parking Slot Assigned**
[ ] 2-Wheeler [ ] 4-Wheeler [ ] Cab / None	_____	Visitor Slot: [ ] / None

1. Security Guard (Inward Entry)	**2. Host Approval**	**3. Security Guard (Exit Verification)**
Sign: _____ Guard Name: _____ Badge/Gate: _____	Approval: [ ] Phone [ ] App Host Sign: _____ Flat Owner / Tenant	Exit Time: ____:____ AM/PM Pass Returned: [ ] Yes [ ] N/A Guard Sign: _____