

# Retail Complex Handover Certificate

Date: \_\_\_\_\_

## Project & Unit Details

Retail Complex Name: \_\_\_\_\_

Unit Number: \_\_\_\_\_

Floor: \_\_\_\_\_

Area (sq.ft): \_\_\_\_\_

Owner / Tenant Name: \_\_\_\_\_

## Handover Checklist

Keys Handed Over: Yes ☐ No ☐

Utilities Connected: Yes ☐ No ☐

Snag List Cleared: Yes ☐ No ☐

Unit Cleaned: Yes ☐ No ☐

Handover Documents Provided: Yes ☐ No ☐

## Remarks

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By signing below, both parties confirm completion of handover process and accept the unit in its present condition.

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Owner / Tenant  
Name: \_\_\_\_\_  
Signature: \_\_\_\_\_

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Developer / Management  
Name: \_\_\_\_\_  
Signature: \_\_\_\_\_

Date: \_\_\_\_\_