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| FULL NAMES: |  | MOBILE NUMBER: |  |
| EMAIL ADDRESS: |  | PROPERTY NAME |  |
| NUMBER OF TENANTS |  | LOCATION |  |

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| # | **HSE****NO.** | **HSE TYPE**Choose an item. | **TENANT NAME** | **MOBILE NO** | **ID NO.** | **NEXT OF KIN****(optional)** | **KIN MOBILE****(optional)** | **RENT** | **DEPOSIT** | **BALANCE** |
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