

# U-CONDOMINIUM RESIDENT INFORMATION FORM

(Used only and exclusively by the Concierge & Property Management)

Date \_\_\_\_\_ Year \_\_\_\_\_ Building (65 St Mary/1080 Bay/Townhomes) \_\_\_\_\_  
Suite \_\_\_\_\_

Owner Occupied  Tenant Occupied  New Form  Updated Revised Form

Parking Space Level P \_\_\_\_ Space # \_\_\_\_ Locker # Level P \_\_\_\_ Locker # \_\_\_\_

**New owners MUST provide a copy of closing documents plus proof of insurance**  
**New tenants MUST provide a copy of the lease agreement plus proof of insurance**

Resident Name(s) \_\_\_\_\_

Resident **E-mail(s)** \_\_\_\_\_

Resident Telephone Info H \_\_\_\_\_ B \_\_\_\_\_ C \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone # \_\_\_\_\_

Does anyone reside in the suite with special challenges requiring assistance during an emergency?

No  Yes  Basic Details: \_\_\_\_\_

Vehicle Make/Model \_\_\_\_\_ Colour \_\_\_\_\_ Plate # \_\_\_\_\_

**PETS: One (2) domestic pet per unit allowed. Provide details:** \_\_\_\_\_

### Off-Site Owner Info (if different from above)

Owner Name(s) \_\_\_\_\_

Owner **E-mail** \_\_\_\_\_

Owner Telephone Info H \_\_\_\_\_ B \_\_\_\_\_ C \_\_\_\_\_

Mailing Address \_\_\_\_\_

**PLEASE RETURN ALL REQUESTED INFORMATION TO THE CONCIERGE DESK**

Protege System <input type="checkbox"/>	Owner Closing Documents <input type="checkbox"/>	Home Owner Insurance <input type="checkbox"/>
Enterphone System <input type="checkbox"/>	Lease Agreement <input type="checkbox"/>	Tenant Content Insurance <input type="checkbox"/>
Building Link System (to be entered by Management) <input type="checkbox"/>		