

**Toronto Standard Condominium Corporation No. 1710**  
**1375 Dupont Street, Toronto**

**RESIDENTS' INFORMATION FORM**

SUITE NO.: \_\_\_\_\_

FOB #'s \_\_\_\_\_ FOB #'s \_\_\_\_\_  
(For Office Use Only) (For Office Use Only)

**1. OWNER:**

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Business: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**2. RESIDENT(S):** (only if different from 1.)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Business: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

**3. Parking Spot No.:** \_\_\_\_\_ **Vehicle Plate No.:** \_\_\_\_\_

Year, Make & Colour of Vehicle: \_\_\_\_\_

Bicycle Rack (Y/N) \_\_\_\_\_ Description of Bicycle \_\_\_\_\_

Locker Number: \_\_\_\_\_

**Lease Information:**

Term: \_\_\_\_\_ Commencement Date: \_\_\_\_\_

**4. In case of Emergency Contact:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

Telephone number, address and email address of emergency contact: \_\_\_\_\_

**5. PURSUANT TO THE ONTARIO FIRE CODE, PLEASE PROVIDE US WITH NAMES OF OCCUPANTS WHO WOULD REQUIRE ASSISTANCE IN THE EVENT OF AN EMERGENCY**

**Person(s) requiring assistance:** \_\_\_\_\_

**DATED** at Toronto, this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_