

# ALLOCATION / TRANSFER

**\*FOR THE OWNER(S) TO COMPLETE\***

Suite #: \_\_\_\_\_ Tower: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ 2<sup>nd</sup> Owner's Name: \_\_\_\_\_

Do you have a gym membership?

☐ Yes☐ No

Please indicate if you own a one or two bedroom suite:

☐ 1 bedroom☐ 2 bedroomDo you as the *owner(s)*, use the gym membership or have you transferred it to your *tenant(s)* (if applicable)?☐ Owner use☐ Tenant use

If you are transferring your membership, have you already provided a copy of your lease agreement to Property Management or Customer Care through the registration process?

☐ Yes☐ No If you answered no, please attach a copy of your lease agreement to this form.Owner's Signature: \_\_\_\_\_ 2<sup>nd</sup> Owner's Signature: \_\_\_\_\_

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

**HARBOURPLAZA**