



IMPERIAL SQUARE

METRO TORONTO CONDOMINIUM CORPORATION No. 1404

ELEVATOR RESERVATION AGREEMENT

Reservation Requested By: \_\_\_\_\_ Suite: \_\_\_\_\_

Owner  Tenant  Other : \_\_\_\_\_ (Please Specify)

Telephone Numbers: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Home Number Work Number Mobile Number

Reservation Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Time: \_\_\_\_ : \_\_\_\_  am  pm (Maximum of 3 hours)  
DD MM YYYY

Move In  Move Out  Delivery

If you are moving in, you will be required to complete a Resident Information Form.  
If you are moving out, please indicate names of any accompanying residents moving out of the suite:

1) \_\_\_\_\_ 3) \_\_\_\_\_  
2) \_\_\_\_\_ 4) \_\_\_\_\_

Forwarding Address & Phone #

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reservation Hours: Monday to Saturday from 9:00am to 9:00pm.  
Elevator Bookings are NOT permitted on Sundays and Statutory Holidays.**

**I agree to the following conditions:**

To ensure against any difficulties, the following rules must be carefully adhered to every time that a move or delivery is taking place:

- Hours of Operation are **9:00a.m. to 9:00pm. Monday to Saturday**,
- Moves are **NOT** permitted on Sunday, Statutory Holidays, or Observed Civic or Municipal Holidays.
- I agree to deposit with the corporation upon signing this agreement and when moving into or out of the building or when moving from one floor to another, a **refundable security deposit of \$150.00** by cheque or money order made payable to **MTCC 1404**. This amount will be refunded provided no damage or loss has been caused to the common elements of the corporation. Damage to or loss of the corporation's property is the responsibility of the resident/owner.
- I agree to provide a **security fee with this agreement in the amount of \$80 to the Corporation as payment for security guard services for a minimum of 4 hours in the event that the reservation is NOT between the hours of 9:00am and 1:00pm, Monday to Friday. This fee will be waived if the reservation is between the hours mentioned above.** Payment must be made by cheque or money order made payable to **MTCC 1404**. Should any further security services be required, it will be charged at an additional fee of \$20 per hour, and will be deducted from the \$150 deposit.
- I agree to be held liable for all damages, which may occur as a result of the use of the elevator, by my agents or me.
- I agree that moves in or out may be made **only by appointment with Management at least 24 hours before the required time.** Management may be reached at **416-847-7296**.
- It is understood and agreed that the moving times must be adhered to strictly.
- I agree that all moves must be made through the loading dock entrance. No items of any type or description are allowed to be moved through the main lobby doors.

- I agree that all empty boxes and moving cartons are to be dismantled and removed immediately from corridors. The building cleaners are not responsible to discard empty cartons/boxes. Please do not leave cartons/boxes in the garbage chute room on the floor. Dismantled cartons/boxes are to be taken to the garbage room on the main floor for disposal.
- I agree that no blockage of corridors or in front of the elevators will be allowed.
- I agree that the corporation and/or its agent will not be held liable for any costs pertaining to a delay, if any, in my receiving the elevator as booked above.
- I agree to advise security staff after the completion of the move so that an inspection can be completed and the elevator pads removed.
- If I fail to advise security staff at the time of completion I understand I will be responsible for any damages created after I complete my move.
- The acknowledgement below must be signed at the time when elevator is booked and must be accompanied by the deposit. This form and the deposit may be left with the security.

I hereby acknowledge that I have read this Agreement and I agree to abide by the Elevator Reservation Rules of the Corporation.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

## Moving In/Out/Delivery Information

### Additional Information

Driver's Name: \_\_\_\_\_

License Plate #: \_\_\_\_\_

Company (if applicable): \_\_\_\_\_

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

Phone #: \_\_\_\_\_

Arrival Time: \_\_\_\_\_

Departure Time: \_\_\_\_\_

Description of size and nature of item delivered or removed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### Payment Information (Office Use Only)

Security Fee: **\$80**  
Security Deposit: **\$150**

Received:  Yes  No  
Received:  Yes  No

Cheque #: \_\_\_\_\_  
Cheque #: \_\_\_\_\_

Returned:  Yes  No If no, please indicate reason: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_