



**The Merchandise Building
Original Lofts**

OWNER / RESIDENT REGISTRATION FORM

SUITE NO: _____

REGISTERED SUITE OWNER(S):

FIRST NAME: _____ **LAST NAME:** _____

PHONE NO(S): (H) _____ (B) _____ (C) _____

E MAIL ADDRESS: _____

By my signature below, I agree to receive all the corporation documents via the email indicated above and understand it is my responsibility to inform management of any change in such address.

Signature: _____

OWNER'S OFFSITE ADDRESS: (** If applicable)

Street & Number	Suite No.	City	Province	Postal Code
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RESIDENT / TENANT INFORMATION: **** Owner(s) must provide a copy of the lease Agreement if the Suite is tenanted**

FIRST NAME: _____ **LAST NAME:** _____

PHONE NO(S): (H) _____ (B) _____ (C) _____

E MAIL ADDRESS: _____

FIRST NAME: _____ **LAST NAME:** _____

PHONE NO(S): (H) _____ (B) _____ (C) _____

E MAIL ADDRESS: _____

A. LOCKER INFORMATION: **LOCKER NO:** _____ **LEVEL:** _____

LOCKER NO: _____ **LEVEL:** _____

B. PARKING INFORMATION:

PARKING SPACE #: _____ **LEVEL:** _____ **MAKE:** _____ **COLOUR:** _____ **LIC.NO:** _____

PARKING SPACE #: _____ **LEVEL:** _____ **MAKE:** _____ **COLOUR:** _____ **LIC.NO:** _____

SPACE RENTED TO: _____ **OR SPACE RENTED FROM:** _____
(If applicable) (If applicable)

C. SUITE ACCESS INFORMATION:

GARAGE REMOTE NO. (1) _____ (2) _____

ACCESS FOB NO: (1) _____ (2) _____ (3) _____

D. DO YOU HAVE ANY PETS? ☐ YES ☐ NO TYPE AND NO. OF PETS _____

(** If you have pets, a Pet Registration Form must be completed and submitted with this form)

E. DO YOU OWN A BICYCLE(S)? ☐ YES ☐ NO NO. OF BICYCLES: _____

BICYCLE DESCRIPTION(S): _____

F. DOES ANYONE IN YOUR SUITE REQUIRE ASSISTANCE IN AN EMERGENCY? ☐ YES ☐ NO

NAME OF PERSON REQUIRING ASSISTANCE: _____

TYPE OF DISABILITY/AILMENT: _____

G. IN CASE OF EMERGENCY CONTACT: (FAMILY/CLOSE FRIEND OF RESIDENT)

NAME: _____ RELATIONSHIP: _____

PHONE NO(S): (H) _____ (B) _____ (C) _____

NAME: _____ RELATIONSHIP: _____

PHONE NO(S): (H) _____ (B) _____ (C) _____

All information on this Form will remain strictly confidential. This information is required for Fire Safety, Building Safety and Security purposes only.

It is the Suite Owner(s) responsibility to provide the Corporation with current Owner and Tenant Information prior to the Elevators being put on service for a move in. If at any time your information changes, please notify Management immediately by email at merchandisebuilding@rogers.com

Please keep us informed so that we can keep you informed.