

DOMAIN RESIDENT INFORMATION SHEET

TSCC 1860

319 Merton St., Toronto, Ontario M4S 1A5

Suite No: _____

Enterphone Code: _____

Suite Resident 1

Last Name

First Name

E-Mail

Home Number

Cell Number

Business or Alternate Number

Resident 2

Last Name, First Name

Phone

Email

Resident 3

Last Name, First Name

Phone

Email

Resident 4

Last Name, First Name

Phone

Email

Please indicate which name you would like shown on the Enterphone listing:

Do you give your permission for Pillar Security or ICON Management personnel to sign for packages delivered for your suite? **YES / NO**

Emergency Contact

Name

Phone Number

Is assistance required for anyone in your suite in the event of an emergency? **YES / NO**

If you are renting the suite, please print the following Suite Owner information:

Print Owner's Full Name

Owner's Phone

Owner's E-Mail

Parking Unit # _____ **Vehicle Make** _____ **Color** _____ **Plate #** _____

Parking Unit # _____ **Vehicle Make** _____ **Color** _____ **Plate#** _____

Locker Unit(s) Number _____

If you are currently renting an additional parking spot or locker, please provide details:

LEVEL LOCKER ROOM # LOCKER #

LEVEL LOCKER ROOM # LOCKER #

Garage Remote(s) Number _____

Access Key(s) Number _____

Access Fob(s) Number _____

Do you own a bicycle(s)? YES / NO

If yes, please register your bike(s) at the Management Office to be allocated a bicycle rack.

Do you have a pet(s)? YES / NO

If yes, please register your pet at the Management Office.

Please provide the following information regarding your suite insurance policy:

INSURANCE COMPANY NAME

POLICY NUMBER

NOTICE TO INFORMATION PROVIDER: The information provided herein is protected under the *Personal Information Protection and Electronic Documents Act* which became effective on January 1, 2004. Please be advised that the return of this form to the Condominium Corporation implies the consent of the resident not only to the collection of this information, but also to the use of this information for the purposes set out below.

PURPOSE OF COLLECTION AND USE: The provision of property management services to the residents of TSCC 1860 to ensure accurate records, appropriate insurance protections for persons and property, the safety and welfare of residents and their guests or visitors, the enforcement of the provisions of the Condominium Act, the Declaration and By-laws and Rules of the Corporation, the provision of repair, maintenance and/or emergency services for the corporation's property and where applicable to the property of residents, the sharing of collected information with board members and officers of the Corporation and of services to residents of the Corporation to fulfill all and any duty or obligation imposed upon the Corporation, or its manager by law.

Primary Resident _____
Signature Date