



SERVICE ELEVATOR RESERVATION FORM

RESERVED FOR: _____ SUITE: _____

PHONE #: _____ DEPOSIT \$100.00 RECEIVED: _____

MOVING IN: _____ MOVING OUT: _____ DELIVERY: _____

NAME OF MOVING COMPANY: _____

NAME OF DELIVERY COMPANY: _____

DATE NEEDED: _____

TIME OF MOVE: 8:00-12:00 12:00-4:00

Please note: The elevator must be booked at least 48 hours in advance of your delivery or move. Any short notice bookings will be at the discretion of the Management Office

Certificate of Agreement

I the undersigned fully understand and agree to adhere to the rules governing the use of the service elevator explained in the Corporation by-laws of P.C.C. 386. I also fully understand and agree that I will leave a damage deposit in the amount of \$100.00 with the Corporation that will be forfeit guests or residents of suite cause by their action of negligence any damage to the Corporation Property, or leave behind any waste materials.

Signed: _____ Date: _____

Damage Checklist

Service Entrance Damage	Yes: _____	No: _____
Elevator Damage	Yes: _____	No: _____
Lobby of Hall Damage	Yes: _____	No: _____
Garbage Boxes Left	Yes: _____	No: _____

Damage Deposit Returned

In person:

Signed: _____ Date: _____