

## ELEVATOR RESERVATION FORM

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The following information is required by the condominium corporation for the purpose of allowing residents and owners to reserve and use the elevator(s) and shall be used for that purpose only.

**Reservation requested by:** \_\_\_\_\_ **Suite no.** \_\_\_\_\_  
(Print first and last name)

Incoming resident: \_\_\_\_\_

Business telephone: \_\_\_\_\_ Residence telephone: \_\_\_\_\_

Resident Email Address: \_\_\_\_\_

The reservation request is for a **move in o\***, or a Delivery o  
(Please check one only.)

DAY OF WEEK: \_\_\_\_\_

TIME: FROM \_\_\_\_\_ AM/PM TO: \_\_\_\_\_ AM/PM  
**(MAXIMUM 2 ½ HOURS)**

DATE: \_\_\_\_\_

**\*THE ELEVATOR MAY ONLY BE USED FOR MOVE INS WHEN ALL REQUIRED FORMS HAVE BEEN COMPLETED AND SUBMITTED TO CONCIERGE**

- COPY OF LEASE SUBMITTED \ PROOF OF OWNERSHIP
- RESIDENT INFORMATION FORMS SUBMITTED
- COPY OF INSURANCE PROVIDED
- A \$500 REFUNDABLE SECURITY DEPOSIT CHEQUE MADE PAYABLE TO:  
(Collecdev (500 Wilson) Inc. (Certified Cheque or Money order for Move out)

**Moving hours: MONDAY TO SATURDAY: 09:00 a.m. to 08:00 p.m.**

**Moving hours: SUNDAY & STAT HOLIDAYS: Not permitted**

\_\_\_\_\_ 09:00 a.m. to 11:30 a.m.  
 \_\_\_\_\_ 11:45 a.m. to 2:15 p.m.  
 \_\_\_\_\_ 2:30 p.m. to 5:00 p.m.  
 \_\_\_\_\_ 5:15 p.m. to 7:45 p.m.

**NO MOVES ALLOWED ON SUNDAY & STATUTORY HOLIDAYS.**

## I UNDERSTAND AND AGREE TO THE FOLLOWING CONDITIONS:

1. I agree to deposit with the Declarant 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 \$500.00 by cheque only. Cheques are to be made payable to Collecdev (Wilson) Inc. This amount will be refunded as soon as practicable after completion of the move and provided no damage or loss has been caused to the common elements of the Corporation. Damage to or loss of the condominium's property is the responsibility of the above-named resident.
2. I agree that the \$500.00 deposit will be forfeited if any items are left behind in the common corridors, moving room, loading zones or at the side of the buildings without Management or Concierge's permission. I agree to provide the certified cheque or money order for the purpose of Move Out.
3. I agree that I shall be held liable for all damage which may occur as a result of the use of the elevator or any other common elements by me or my agents.
4. Management may be reached Monday to Friday 09:00 am to 05:00 pm by contacting 416-546-2126 x174 and Concierge can be reached 24/7 by contacting TBD.
5. I agree that all elevator bookings are made only by appointment with the Concierge, who may be reached at front desk by contacting **437-230-6047 or Nordic.frontdesk@diamondps.ca.**
6. It is understood and agreed that the moving times must be adhered to strictly.
7. I agree that all moves must be made through the rear entrance. **No items of any type or description are allowed to be moved through the main lobby doors.**
8. I agree that all empty boxes and moving cartons are to be dismantled and removed immediately from corridors. These boxes must be removed from the site by the moving/delivery people. Otherwise, you must break them down and place them in the recycle bin located in the Loading Bay.
9. I agree that no furniture will be left behind by me or my movers in the common areas of the building. If furniture, boxes, etc. is found after I finish with the moving or delivery, my deposit cheque may be cashed in full, and no refund will be issued to me.
10. I agree that no blockage of corridors or in front of the elevators will be allowed.
11. I agree that the Declarant and/or its agent will not be held liable for any costs pertaining to the delay, if any, in my receiving the elevator as booked above.
12. I agree to advise the Concierge after the completion of the move so that an inspection can be completed, and the elevator pads removed.
13. If I fail to advise Concierge at the time of completion, or fail to sign the post inspection sheet, I understand I will be responsible for any damage created after I complete my move.
14. I agree to duly complete a Resident Information Sheet prior to moving in.



I HEREBY ACKNOWLEDGE that I have read this agreement as presented above and I accept all the conditions contained therein:

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
DATE:

\_\_\_\_\_  
Approved by Management \ Concierge

\_\_\_\_\_  
DATE:

RECEIVED DEPOSIT: \$\_\_\_\_\_ (cheque only) Cheque Number: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_

ELEVATOR INSPECTED: (YES / NO) \_\_\_\_\_ DATE: \_\_\_\_\_

INSPECTED BEFORE BY: \_\_\_\_\_ AFTER: \_\_\_\_\_

APPROVED TO RETURN DEPOSIT: (YES / NO) \_\_\_\_\_

DEPOSIT RETURNED TO: (**Print name**) \_\_\_\_\_ DATE: \_\_\_\_\_

DEPOSIT RECEIVED BY: (**Resident to Sign**) \_\_\_\_\_

REASON DEPOSIT **NOT** RETURNED:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

INSPECTION DETAILS:	BEFORE	AFTER
Ground level		
Exterior Doors		
Elevator Doors / Frames		
Elevator Cab / Pads		
Corridor Floors		
Corridor Walls		
Corridor Furnishings		
Lighting Fixtures		
Suite Door		
Loading Bay		
Elevator has been turned ON \ OFF service		
Other		
Elevator has been turned ON \ OFF service		
Other		