



TORONTO STANDARD CONDOMINIUM CORPORATION 2439

55 Regent Park. Blvd. Toronto, ON, M5A 0C2

Parcel Waiver Form

Suite: _____ Date: _____

Name of Resident(s): _____

Please list all names that parcels can be accepted under

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Home Phone Number: _____ Cell Phone Number: _____

Work Phone Number: _____ Ext.: _____.

In my / our absence, I / we the above Resident(s) authorize OPP SOUTH CONDOMINIUMS/ TSCC 2439 and Agents of TSCC 2439 to accept and sign for all small parcels (no larger than 18" x 18") that may be delivered.

Additionally, I release OPP SOUTH CONDOMINIUMS/ TSCC 2439 and Agents of TSCC 2439 from any responsibility arising from any possible damage, losses, or thefts that may be incurred as a result of my request. _____ Resident's initial.

I/ we understand that it will **NOT** be the responsibility of OPP SOUTH CONDOMINIUMS/ TSCC 2439 and Agents of TSCC 2439 for any unwanted items which have not been picked up by Resident(s) to be left at concierge to be returned to sender. Any/ all items **MUST** be picked up within **3 days** notification of receipt given by concierge to Resident.

Signature: _____ Print Name: _____

Date: _____