



## TORONTO STANDARD CONDOMINIUM CORPORATION No. 2221 ELEVATOR RESERVATION AGREEMENT

Reservation Requested By: \_\_\_\_\_ Suite: \_\_\_\_\_

☐ Owner ☐ Tenant ☐ Other : \_\_\_\_\_ (Please Specify)

Telephone Numbers: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Home Number Work Number Mobile Number

Reservation Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Time: \_\_\_\_ ☐ am ☐ pm to \_\_\_\_ ☐ am ☐ pm (Maximum of 3 hours)  
DD MM YYYY

☐ Move In

☐ Move Out

☐ Delivery

If you are moving in, you will be required to complete a Resident Information Form.

If you are moving out, please indicate names of any accompanying residents moving out of the suite:

1) \_\_\_\_\_ 3) \_\_\_\_\_  
2) \_\_\_\_\_ 4) \_\_\_\_\_

Forwarding Address & Phone #

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reservation Hours: Monday to Saturday from 9:00am to 4:00pm**  
**Elevator Bookings are NOT permitted on Sundays and Statutory Holidays.**

### I agree to the following conditions:

The following rules must be carefully adhered to every time that a move or delivery is taking place:

- Hours of Operation are **9:00a.m. to 4:00pm. Monday to Saturday**,
- Moves are **NOT** permitted on Sunday, Statutory Holidays, or Observed Civic or Municipal Holidays.
- I agree to deposit with the corporation 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 or money order. This amount will be refunded as soon as possible provided no damage or loss has been caused to the common elements of the corporation. Damage to or loss of the corporation's property is the responsibility of the resident/owner.
- I agree to be held liable for all damages, which may occur as a result of the use of the elevator, by my guests, agents or myself.
- I agree that moves in or out may be made **only by appointment with the Security staff at least 24 hours before the required time**. Security may be reached at **416-368-8839**.
- It is understood and agreed that the moving times must be adhered to strictly.
- I agree that all moves must be made through the loading dock entrance. No items of any type or description are allowed to be moved through the main lobby doors.
- I agree that all empty boxes and moving cartons are to be dismantled and removed immediately from corridors. The building cleaners are not responsible to discard empty cartons/boxes. Please do not leave cartons/boxes in the garbage chute room on the floor. Dismantled cartons/boxes are to be taken to the Moving Room on the main floor for disposal.
- I agree that no blockage of corridors or in front of the elevators will be allowed.
- I agree that the corporation and/or its agent will not be held liable for any costs pertaining to a delay, if any, in my receiving the elevator as booked above.
- I agree to advise security staff after the completion of the move so that an inspection can be completed and the elevator pads removed.
- If I fail to advise security staff at the time of completion, I understand I will be responsible for any damages created after I complete my move.



The acknowledgement below must be signed at the time when elevator is booked and must be accompanied by the deposit. This form and the deposit may be left with security at the Concierge Desk

I hereby acknowledge that I have read this Agreement and I agree to abide by the Elevator Reservation Rules of the Corporation.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

AREA INSPECTED	BEFORE INSPECTION	AFTER INSPECTION (Please list comments below, if there are any damages.)
Loading Dock Area		
Moving Room and Doors		
Ground Level Lobby and Doors		
Elevator Doors/Frame		
Elevator Cab/Pads		
Corridor Floors/Walls/Light Fixtures		
All boxes broken down and disposed of in the bin in the Ground floor designated area only		
Concierge Signature		
Applicant's Signature		
DATE		

### **Deposit Information (Staff Use Only)**

Security Deposit: **\$500**      Received: ☐ Yes ☐ No      Cheque #: \_\_\_\_\_

Received by: \_\_\_\_\_      Date: \_\_\_\_\_

Returned: ☐ Yes ☐ No      Date: \_\_\_\_\_      Applicant Signature: \_\_\_\_\_

If not returned, please indicate reason: \_\_\_\_\_



## Moving In/Out/Delivery Information

### Additional Information

Driver's Name: \_\_\_\_\_

License Plate #: \_\_\_\_\_

Company (*if applicable*): \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Arrival Time: \_\_\_\_\_

Departure Time: \_\_\_\_\_

Description of size and nature of item delivered or removed:

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\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date