METROPOLITAN TORONTO CONDOMINIUM CORPORATION NO. 949 NUMBER ONE YORK QUAY

77/99 HARBOUR SQUARE, TORONTO, ONTARIO, M5J 2S2 TEL: 416-203-2004 FAX: 416-203-2287



ELEVATOR BOOKING AND MOVE IN/OUT AGREEMENT

Booki	Requested By:				
Suite I	No:	N/S			
Busine	ess Phone:	Hor	ne Phone:		
move in The rec	ooking request is for 77/99 Hardin move out quested date and time of the use tate of the move:	delivery	ne use on an elevator for the purpose of a renovation		
Time:	9:30 a.m. – 12:00 p.m.				
	12:30 p.m. – 3:00 p.m.	Check One	Only		
	3:30 p.m. – 6:00 p.m.				
_	rtant Note to South Tower or/Trailer: Height 14 feet	•	ximum Height and Length of		
 I understand and agree to the following conditions: I agree to deposit with the Corporation upon signing this Agreement, a refundable security deposit of \$250.00 by cash, money order, certified cheque or credit card, payable to M.T.C.C. 949. This amoun will be refunded upon satisfactory completion of the move and not having incurred any liability to the Corporation subject to an inspection by staff. I will be held liable for all liabilities which may occur as a result of the use of the elevator by me or my agents. Moves in or out may be made only by appointment, approved by the Management Office. It is understood and agreed that should our movers arrive more than one (1) hour after the scheduled starting time of our move as indicated above, the move may not be allowed and may have to be reschedule for another day. All moves must be made through the designated move in rooms. No items of any type or description are allowed to be moved through the main lobby doors. All empty boxes and moving cartons are to be dismantled and removed immediately from corridors. No blockage of corridors or in front of elevators or stairwells will be allowed. The Corporation and/or its agents will not be held liable for any costs pertaining to the delay, if any, in our receiving the elevator as booked above or during its usage. Pertaining to a move out only: I agree to return to Management all FOBS and remote controls where applicable, and failure to do so will forfeit the return of my elevator security deposit. I hereby acknowledge that I have read this Agreements as presented above and hereafter. I agree to the Rules and Regulations in force in the Condominium from time to time and I hereby accept all of the condition contained herein and in the Rules and Regulations, a copy of which I have received and read. No anim					
	Applicant Signature	_	Date		
	Approved by M.T.C.C. 949	.	Date		

NOTE: FOR MOVING OUT ONLY - ELEVATOR DAMAGE DEPOSIT WILL NOT BE RETURNED UNLESS YOUR LOCKER HAS BEEN EMPTIEDAND SECURITY HAS INSTALLED A MANAGEMENT LOCK ON THE EMPTY LOCKER.

NO MOVES ON SUNDAYS AND HOLIDAYS

OFFICE USE ONLY:			
Security Deposit Receive Amount of:		H CERT. C	HEQUE MONEY ORDER CREDIT CA
A DE A C INICDECTED	DEFODE	A EXDED	
AREAS INSPECTED Moving Room/Doors	BEFORE	AFTER	
Elevator Doors/Frames			
Elevator Cab/Pads			
Corridor Floor/Walls			
All Fixtures			
Suite Door			
Elevator Foyer			
Emptied Locker #			
Garbage Chute Room			
Receiving Area			
MOVING VEHICLES	Driver's Name: Company: License Plate: Van Number: Arrival Time: Departure Time:		
Ι,	hereby ackn	owledge recei	ving the return of my security deposit of
\$ on this	day of		, 200
My new address will be:			n emptied and security to ensure managen

lock on empty locker.