

# YCC 50: 1350 & 1360 York Mills Road, North York, ON

Office: 416-441-3355/Superintendent: 416-700-1766/ycc50.pm@nadlan-harris.com

## ELEVATOR RESERVATION AGREEMENT (MOVES & DELIVERIES)

Reservation requested by (First & Last Name): \_\_\_\_\_

Unit & Building #: \_\_\_\_\_ Tel./Cell.: \_\_\_\_\_ E-mail: \_\_\_\_\_

Resident's First/Last Name if Different from above: \_\_\_\_\_

**\*IF THIS IS A RENTAL UNIT, A COPY OF THE LEASE MUST BE PROVIDED TO THE OFFICE, PRIOR TO MOVING IN\***

**\*\*\*3 days booking in advance is required\*\*\***



**Elevator Hours of Use: Monday to Saturday: 9am - 8pm**

Move-in /out: (month/day/year) \_\_\_/\_\_\_/\_\_\_ Delivery: (month/day/year) \_\_\_/\_\_\_/\_\_\_

Requested Time of Elevator: 9:00am -12:00pm \_\_\_ 1:00pm - 4:00pm \_\_\_ 4:00pm-8:00pm \_\_\_

**There will be a fee of \$50.00 per minutes levied for all moves going over their allotted time.**

**Note that movers who arrive after the scheduled starting time as indicated above, will not be allowed to.**

*Move-ins and move-outs will have priority between Monday and Friday; but they're not permitted on Sundays or Holidays, as defined in the Legislation Act 2006, S.O.2006, c.21 Sch. F, or any amendment thereto.*

**\*\*\*NO MOVES OR DELIVERIES ARE TO TAKE PLACE ON SUNDAYS OR STATUTORY HOLIDAYS\*\*\***

NOTE: A refundable damage deposit of \$200.00 is required for moving in or out, delivery of any kind, by cash, certified cheque or a money order; it will be returned to you within five business days, upon the completion of the move/delivery providing, PROVIDED:

- *Damage to the common elements of the Corporation was caused.*
- *Moving/delivery was conducted through the front door.*
- *Items either small or large were left behind on the hallways, lobby etc.*

An inspection will be conducted both, prior to and after the use of elevator, to determine whether there were damages caused to the elevator, lobby and corridors after the use of elevator is complete.

### **I UNDERSTAND AND AGREE TO THE FOLLOWING:**

1. I will be held liable for the full costs of all repairs to any damage which may occur as a result of the use of the elevator or common areas by my guests, my family, myself and anyone else who helps with the move or by the moving/delivery company I am using.
2. I will accept the cost to the repairs as assessed by the management office and acknowledge that, all or part of the damage deposit will be withheld and applied to the cost of repairs.
3. All moving and/or deliveries operations should be conducted through the back of building and the service elevator. No blockage of corridors, lobby or the front of the elevators, will be permitted and no furniture or goods of any type shall be transported through the front of the building.
4. The moves and/or delivery persons, must announce their arrival to the Superintendent.

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**\*\*\* I HEREBY ACNOWLEDGE THAT I HAVE READ THIS AGREEMENT AND I AGREE TO ABIDE BY THE RULES AND REGULATIONS OF THE CORPORATION, AS WELL AS, I ACCEPT ALL OF THE CONDITIONS CONTAINED HEREIN. \*\*\***

The moving sheet must be signed, in order to have the deposit returned to you.

**SUPERINTENDENT OR STAFF MUST CONDUCT INSPECTIONS WITH RESIDENT, BEFORE AND AFTER THE ELEVATOR IS USED.**

| AREA INSPECTED                      | BEFORE | AFTER |
|-------------------------------------|--------|-------|
| <i>Suite Door:</i>                  |        |       |
| <i>All Fixtures in the Hallway:</i> |        |       |
| <i>Wallpaper/ Floor:</i>            |        |       |
| <i>Elevator Door &amp; Frames:</i>  |        |       |
| <i>Outside Loading Area:</i>        |        |       |
| <i>Site Doors:</i>                  |        |       |
| <i>Grounds &amp; Landscaping:</i>   |        |       |

*Resident Name & Signature:* \_\_\_\_\_

*Date:* \_\_\_\_\_

*YCC #50 Staff Signature:* \_\_\_\_\_

*Date:* \_\_\_\_\_

**\*\*\*Deposit Returned to:** \_\_\_\_\_

*Resident Signature:* \_\_\_\_\_

*YCC # 50 Staff Signature:* \_\_\_\_\_