YORK REGION CONDOMINIUM CORPORATION NO. 616  
33 Weldrick Road East, Richmond Hill, ON L4C 8W4

GUEST SUITE RENTAL AGREEMENT

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| **RESIDENT NAME** | LAST NAME FIRST NAME | | |
| **SUITE NUMBER** |  | **HOME or CELL PHONE** |  |
| **ARRIVAL DATE** |  | **DEPARTURE DATE** |  |
| **CHECK IN TIME** | 3:00 PM | **CHECK OUT TIME** | 11:00 AM |

**\*NUMBER OF NIGHTS**: Maximum of 7 nights without Board of Director Approval

**I/We understand and agree to the following conditions:**In consideration of the licensee agreeing to pay **fifty dollars ($50.00) per night, per guest  
suite,** for the use and occupation of the guest suite, YRCC616 hereby agree to grant the  
undersigned a License to sue the guest suite only for the purpose of accommodating guests and/or members of the family of the undersigned for the period indicated above.  
  
The undersigned agrees and acknowledges that this license shall not create the relationship of  
Landlord and Tenant between YRCC616 and the undersigned, and that the occupant(s) of the guest suite shall be as a licensee only for the period aforesaid. The undersigned covenants and agrees that this license shall terminate at the expiration of the said period and te licensee undertakes to vacate the said suite on, or before, the date of experiation. **The undersigned agrees that the Guest Suite FOB(s) will be returned to the Superintendent, Management Office or Management Office Mail Box by check-out time on the day of departure and further agrees that the cost ($25.00) to replace a lost FOB will be deducted from the damage deposit.** The licensee further covenants to keep the said Guest Suite and the furnishings therein in good repair and shall be responsible for all damage to such Guest Suite furnishings not resulting from reasonable wear and tear. The licensee further agrees that their guests and/or members of their family occupying the said suite shall abide by the Rules and Regulations of YRCC616 as they may exist from time to time.  
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Date Signature (Resident)

**YRCC 616 IS NOT RESPONSIBLE FOR ARTICLES LEFT IN A GUEST SUITE**

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| **FOR OFFICE USE ONLY** | | |
| SUITE ASSIGNED | GUEST SUITE 1 | GUEST SUITE 2 |

**Rental Payment Received for # \_\_\_\_ Nights @ $50 $\_\_\_\_\_Cash\_\_\_\_\_\_ Cheque\_\_\_\_\_\_\_ Credit Card\_\_\_\_  
Damage Deposit ($100) Rec’d \_\_\_\_\_ (required if paying by cash or cheque) Returned \_\_\_\_\_\_  
Garage Remote Requested? \_\_\_\_\_\_\_Garage Remote Deposit ($50) Received \_\_\_\_\_\_**