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

RESIDENT INFORMATION REGISTER: DATE: _____ SUITE: _____

THE CORPORATION IS REQUIRED TO MAINTAIN ACCURATE OCCUPANCY RECORDS FOR ALL SUITES. THIS FORM MUST BE COMPLETED AND RETURNED TO THE MANAGEMENT OFFICE AND **MUST BE UPDATED AS INFORMATION CHANGES**.

SUITE RESIDENT(S) INFORMATION: OWNER ☐ TENANT ☐   ENTERPHONE#_____

PRINT CLEARLY	RESIDENT 1	RESIDENT 2	RESIDENT 3
FIRST NAME			
LAST NAME			
HOME PHONE			
WORK PHONE			
CELL PHONE			
E-MAIL			

Use reverse side for additional residents or if additional space is required

NAME AS IT IS TO BE LISTED ON ENTERPHONE DIRECTORY:

_____

LAST NAME, FIRST NAME or INITIALS - *PRINT CLEARLY (maximum of 20 characters, including spaces)*

If you are a Tenant please provide the Owner's name, address and telephone number:

_____
Name   Street   Suite No.   City   Province   Postal Code

_____
Home Telephone   Business Phone   Cell Phone

PET DISCLOSURE – *Dogs are NOT allowed (see Rules & Regulations)*

Type	Name	Colour

PARKING *VEHICLES PARKED IN P1 & P2 MUST DISPLAY A YRCC DECAL IN THE LOWER LEFT OR RIGHT CORNER OF THE FRONT WINDOW*

SPACE	Owned	Rented from	VEHICLE MAKE	COLOUR	LICENSE PLATE	DECAL

THIS INFORMATION WILL BE KEPT PRIVATE AND CONFIDENTIAL

YRCC 616 RESIDENT INFORMATION REGISTER, continued: SUITE: _____

SUITE RESIDENT(S) INFORMATION: *(continued from front if required)*

PRINT CLEARLY	RESIDENT 4	RESIDENT 5	RESIDENT 6
FIRST NAME			
LAST NAME			
HOME PHONE			
WORK PHONE			
CELL PHONE			
E-MAIL			

LOCKERS

LOCKER NO	Owned	Rented from

DO YOU REQUIRE ASSISTANCE IN AN EMERGENCY? YES ☐ NO ☐

IF "YES" please list:

NAME	ASSISTANCE REQUIRED

This information will be added to the "Fire Plan" which is available to the Fire Department

EMERGENCY CONTACTS

NAME	TELEPHONE NO.

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