



Toronto Standard Condominium Corporation No. 2005

# RESIDENT INFORMATION FORM

Suite Number: \_\_\_\_\_ Enterphone Code: \_\_\_\_\_ Enterphone Telephone #: \_\_\_\_\_

Are you an Owner  or Tenant  (Please check one)

**NAMES OF RESIDENTS**

Name: \_\_\_\_\_  
(First) (Last)

Name: \_\_\_\_\_  
(First) (Last)

Name: \_\_\_\_\_  
(First) (Last)

Telephone Res.: \_\_\_\_\_, Bus.: \_\_\_\_\_, Cell/: \_\_\_\_\_

Parking Space: \_\_\_\_\_ Lic. # \_\_\_\_\_ Make/Model: \_\_\_\_\_

Parking Space: \_\_\_\_\_ Lic. # \_\_\_\_\_ Make/Model: \_\_\_\_\_

Rented Parking Space: \_\_\_\_\_ Lic. # \_\_\_\_\_ From Suite: \_\_\_\_\_

Locker(s) #: \_\_\_\_\_ Bike Rack(s) #: \_\_\_\_\_

Pets: \_\_\_\_\_

Remote Numbers: \_\_\_\_\_

Fob Numbers: \_\_\_\_\_

DOES ANYONE IN YOUR SUITE REQUIRE ASSISTANCE DURING AN EMERGENCY SITUATION? (If yes, please give name and reason)

Name \_\_\_\_\_, Reason \_\_\_\_\_

Your Emergency contact (Name): \_\_\_\_\_

Telephone Number \_\_\_\_\_ Relationship \_\_\_\_\_

**E-Mail Registration:**

E-mail address: \_\_\_\_\_

\* In signing this registration form I grant permission to the management office of TSCC 2005 to use electronic mail to send newsletters, notices, correspondence, maintenance reminders and other forms of information. The Corporation will not distribute this e-mail address or other personal information to any other party.

Signature \_\_\_\_\_ Date \_\_\_\_\_