Top of Westney Condominium Residences

Resident Tenant Information Sheet

This form **may** be used by tenants to provide the corporation with the notice required by s. 46.1(2) of the *Condominium Act*, *1998* and the accompanying regulations. The form may also be used by tenants at any time to notify the corporation of an tenant's name, the identity of the tenant's unit, and the tenant's address for service.

Unit #:	Date:	YYYY	MM	DD	

Names of Tenant(s) who signed the lease agreement			
Full Name:		Tel #:	Cell #:
		Email address:	
Check if assistance Required in the event of an emergency	☐	Type of Disability:	
Full Name:		Tel #:	Cell #:
		Email address:	
Check if assistance Required in the event of an emergency	☐	Type of Disability:	
Full Name:		Tel #:	Cell #:
		Email address:	
Check if assistance Required in the event of an emergency	☐	Type of Disability:	

Residents (please list all residents of the unit that are *not* listed above)					
Full Name:	Relationship:	Birthday (if under 16 years)	YYYY	MM	DD
Check if assistance Required in the event of an emergency	☐	Type of Disability:			
Full Name:	Relationship:	Birthday (if under 16 years)	YYYY	MM	DD
Check if assistance Required in the event of an emergency	☐	Type of Disability:			
Full Name:	Relationship:	Birthday (if under 16 years)	YYYY	MM	DD
Check if assistance Required in the event of an emergency	☐	Type of Disability:			
Full Name:	Relationship:	Birthday (if under 16 years)	YYYY	MM	DD
Check if assistance Required in the event of an emergency	☐	Type of Disability:			

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Emergency Contacts (optional)		
Name:	Tel #:	Cell #:
	Email address:	
Name:	Tel #:	Cell #:
	Email address:	

Parking (note: please mark 'empty' if not using the space(s))				
Parking Space:	Plate #:	Make:	Model:	Colour:
Parking Space:	Plate #:	Make:	Model:	Colour:

Tenants Acknowledgement		
I/we acknowledge and the I/we, the members of my household, and my guests from time to time, will, in using the 'unit' rented to me and the 'comment elements', comply with the Condominium Act, the Declaration, By-Laws, and all Rules and Regulations of the Condominium corporation, during the term or my tenancy, and will be subject to the same duties imposed by the above as if I/we were a 'unit' owner, except for the payment of common expenses unless otherwise provided by the Condominium Act, or the Declaration. I further acknowledge that I/we understand that this is a no pet building, and no one can smoke or vape anywhere in the building, including units, balconies or patios, or within 9 metres of the building.		
Print Name:	Signature:	Date:

Office Use Only (check if given paper, or on-line version (CP) accepted)			
	Paper	On-Line	Signature:
Rules:	☐	☐	
By-laws:	☐	☐	
Declaration:	☐	☐	

*Only tenants that were residents before June 10th, 2018 and applied for exemption before September 10th, 2018 may be exempted by the Corporation, as per the no-smoking rule. Tenants who are exempted must ensure that their smoking does not interfere with other owners/tenants' enjoyment of their units, or cause harm as per section 58 and 117 of the Condominium Act 1998.