

OWNER / TENANT INFORMATION FORM

Attention: Owner(s) of _____ -2759 Carousel Crescent Closing Date (if applicable): _____

In order to ensure that our records are accurate, all owners are requested to complete the following form and return it to our office as soon as possible when there has been a change of ownership or tenancy.

OWNER INFORMATION - Residency Address

Name(s): _____ Date: _____, 20____

Address: _____ City: _____ Province: ____ Postal Code: _____

Tel. No.: _____
(home) (work) (cell)

Email: _____ Parking No.: ____ Licence Plate: _____

Emergency Contact or Rental Manager: _____

Tel. No.: _____
(home) (work) (cell)

*In accordance with the *Condominium Act, 1998*, non-resident owners are required to furnish to Property Management firm with their off-site address and the appropriate tenant information. Should you be a non-resident owner, please complete the following:

TENANT INFORMATION

- The unit is vacant until further notice.
- The owner has completed the Form 5 on the reverse.
- All Management and Corporation correspondence is to be sent to the Rental Manager with authority to act on the owner's behalf. Documented authorization is attached. Initial: _____

"I acknowledge and agree that I, the members of my household, and my guests from time to time, will, in using the Unit rented by me and the common elements, comply with the Condominium Act, the declaration, the by-laws, and all rules of the Corporation, during the term of my tenancy, and will be subject to the same duties imposed by the above as if I were a unit owner, except for the payment of common expenses unless otherwise provided by the Condominium Act." [as required by the Declaration III 1 (c)]

Tenant's Signature(s): _____ Date: _____, 20____

Tenant's Name(s): _____

Address: _____ City: _____ Province: ____ Postal Code: _____

Tel. No.: _____
(home) (work) (cell)

Email: _____ Parking No.: ____ Licence Plate: _____

Once completed, please return this form to:

Integral Property Management
200 - 277 St-Joseph Boulevard, Gatineau QC J8Y 3Y2
or Email to: AdminOne@integralpm.ca
or Fax to: 613-739-8486

Form 5
SUMMARY OF LEASE OR RENEWAL
(Clause 83 (1) (b) of the *Condominium Act, 1998*)

To: Carleton Condominium Corporation 383

1. This is to notify you that:

a written or oral lease, sublease, assignment of lease
(strike out whichever is not applicable)

OR

a renewal of a written or oral lease, sublease, assignment of lease has been entered into for:
(strike out whichever is not applicable)

Unit(s), **Level(s)**

Parking
(include any parking or storage units that have been leased)

On the following terms:

Name of lessee(s) (or sublessee(s)):

Telephone number: **E-mail address, if any:**

Commencement date:

Termination date:

Option(s) to renew:
(set out details)

Rental payments:
(set out amount and when due)

Other information:.....
(at the option of the owner)

2. I (We) have provided the lessee(s), sublessee(s) with a copy of the declaration, by-laws and rules of the condominium corporation.

3. I (We) acknowledge that, as required by subsection 83 (2) of the *Condominium Act, 1998*, I (we) will advise you in writing if the lease, sublease, assignment of lease is terminated.

Dated this **day of**, 20.....

.....
(signature of owner(s)) **(print name of owner(s))**
(In the case of a corporation, affix corporate seal or add a statement that the persons signing have the authority to bind the corporation.)

.....
(address)

..... **(telephone number)** **(e-mail address, if any)**