

Schedule "D"—MOVING AGREEMENT

No MOVING ELEVATOR Reservation will be confirmed UNLESS:

- Schedule "A"—RESIDENT'S DATA CERTIFICATE is completed & signed, and
- Schedule "D"—MOVING AGREEMENT is completed and signed, and
- Moving Fee & Damage Deposit is paid.

DATE OF MOVE: DAMAGE DEPOSIT (\$1,000.00 Cheque or Money Order) RECEIVED: The DAMAGE DEPOSIT will be deposited to the Corporation's bank account. Any charges i insufficient funds will be the responsibility of the person providing the cheque. The DAMAGE and to the extent not required to repair damage to the common elements. The DAMAGE costs incurred by the Corporation for disposal of renovation or moving-related materials ar Resident or resident's Agent in the corporation's bins or anywhere on the common elements. STATEMENT BY RESIDENT "I/We have read and understand the attached excerpt from the Rules or regarding MOVING, DELIVERIES AND REMOVALS". DATE: RESIDENT'S SIGNATURE: DAMAGE DEPOSIT RETURN (for Office Under the Nove):									
DAMAGE DEPOSIT (\$1,000.00 Cheque or Money Order) RECEIVED: The DAMAGE DEPOSIT will be deposited to the Corporation's bank account. Any charges i insufficient funds will be the responsibility of the person providing the cheque. The DAMAGE Damage to the common elements. The DAMAGE D costs incurred by the Corporation for disposal of renovation or moving-related materials ar Resident or resident's Agent in the corporation's bins or anywhere on the common elements. STATEMENT BY RESIDENT "I/We have read and understand the attached excerpt from the Rules or regarding Moving, Deliveries and Removals". DAMAGE DEPOSIT RETURN (for Office UDAMAGE DEPOSIT RETURN) DAMAGE DEPOSIT RETURN (for Office UDAMAGE DEPOSIT RETURN) INSPECTION (after Move): [Inspection (after Move): Inspected BY: DATE: MOVING COMPANY NAME: MOVING COMPANY NAME: MOVING VEHICLE LICENSE PLATE #: DAMAGE DEPOSIT - RETURNED TO RESIDENT: No Damage \$	PHONE NUMBER:								
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DATE OF INSPECTION (before Move): DATE OF INSPECTION (after Move): [INSPECTION includes loading area, lobby area, elevator cab and hallway.] INSPECTED BY: INSPECTION REPORT: MOVING COMPANY NAME: MOVING VEHICLE LICENSE PLATE #: DAMAGE DEPOSIT - RETURNED TO RESIDENT: No Damage \$	RE:	NATURE:							
Date of Inspection (after Move): [INSPECTION includes loading area, lobby area, elevator cab and hallway.] Inspected by: Inspection Report: Moving Company Name: Moving Vehicle License Plate #: Damage Deposit - Returned to Resident: No Damage \$	RN	TUR	(for	Offic	ce Us	e Only)			
[INSPECTION includes loading area, lobby area, elevator cab and hallway.] INSPECTED BY:									
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MOVING COMPANY NAME: MOVING VEHICLE LICENSE PLATE #: DAMAGE DEPOSIT - RETURNED TO RESIDENT: No Damage \$				Паті	F•				
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MOVING VEHICLE LICENSE PLATE #:									
• DAMAGE DEPOSIT - RETURNED TO RESIDENT: No Damage \$									
DAMAGE DEPOSIT - HELD BY MANAGEMENT: Total Damage			No	Damage	\$				
				TOTAL	. Damage	\$			
• BALANCE DUE (to Resident/Corporation):		:	_			\$			



Schedule "D"—MOVING AGREEMENT (continued)

Section M-1 Administration for Moves

- 1. When planning a household move, or expecting delivery/removal of large items (e.g. furniture, appliances, etc.), the Resident shall notify the Property Manager to arrange for any protective elevator padding and, if required, to place the elevator "On Service":
 - a) The Service elevator shall be assigned on a first-come-first-served basis.
 - b) The date and time for the use of the Service elevator shall be booked with the Property Manager, with as much advance notice as possible.
 - c) Household moves and large deliveries/removals may take place only during the following hours:

Mondays - Saturdays: 08:00 - 18:00
 Sundays & Holidays: Not permitted

- d) It is possible to accommodate more than a single household move in one building in any one day.
- 2. No Service elevator reservation can be confirmed for a Household Move, unless the following conditions are met:
 - a) Schedule "A"—Resident's Data Certificate must be completed & signed, and
 - b) Schedule "D"—MOVING AGREEMENT must be completed & signed, and
 - c) DAMAGE DEPOSIT must be paid.
- Once the Service elevator booking has been confirmed, the Superintendent will arrange for any protective padding which may be required for the move or delivery.
- 4. Before and after placing elevator "On Service", the Superintendent and the Resident, or designated representative, will inspect the elevator and other relevant common elements, and secure the Resident's signature on the MOVING AGREEMENT noting any existing damage, together with any damage resulting from the move. (See also Section M-2, Household Moves, item 2.)
- Immediately upon completion of any move or delivery, the Resident shall notify the Property Manager (or the Gatehouse after 5:00 p.m.), so that the elevator can be returned to normal service.

Section M-2 HOUSEHOLD MOVES

1. Household moves are permitted only after making the necessary arrangements with Management [see Section M-1, Administration] and may take place only during the following hours:

Mondays - Saturdays: 08:00 - 18:00
 Sundays & Legal Holidays: Not permitted

- 2. Reservations for the move-in elevator will be confirmed by Management upon receipt of the applicable Moving Fee & Damage Deposit, as well as a completed and signed Schedule "A"—RESIDENTS DATA CERTIFICATE and Schedule "D"—MOVING AGREEMENT, in such form as the Joint Operations Committee may determine from time to time.
 - a) The DAMAGE DEPOSIT will be used to defray the cost to repair any damage to the common elements caused by the move. If such damage is less than the Damage Deposit, the unused portion will be refunded within ten working days. If damage exceeds the Damage Deposit, the Resident (or Owner in the case of a Lessee's move causing the damage) who is moving shall pay such excess to the Corporation on demand.
 - b) The DAMAGE DEPOSIT may be used to defray any costs incurred by the Corporation for disposal of renovation or moving-related materials and refuse which has been left by a Resident or resident's agent in the Corporation's bins or anywhere on the common elements.
- 3. Only the Service elevator, properly hung with protective padding by building staff, shall be used for moving furniture and/or furnishings.
- 4. Each non-resident helping to effect a move and who is not wearing an identifying uniform, must register with the gatehouse and obtain a *Visitor badge*, which must be worn, prominently displayed, for the duration of the move.
- All furniture and/or furnishings shall be moved through the delivery doors of the building. Moving furniture and/or furnishings through the main front entrance of the building is prohibited.
- At the completion of a move or delivery/removal of furniture and/or furnishings, the Resident shall ensure that the delivery doors are properly closed.
- 7. Any Resident shall close delivery doors found propped open and unattended.
- The Corporation shall not be responsible for extra charges of movers to individual Owners or Lessees for any delays during moves.



Schedule "D" Service Elevator Inspection Report

Occup	oant Name(s):				Suite #		
Movin	na Nate:		Moving In: □	 Moving Out: □	1		
			•	ivioving Out.			
IVIOVII	ig Company.	Tes Ivalle		NSPECTION	_ 110 🗅		
Pre-M	love Inspection Da						
	love Inspection Re						
(a)	No defects to re	eport before move	□; or				
(b)	-			e noted prior to the m			
		/We have read and				and Service Elevator")	
I/We a	acknowledge that t	he results of the Pro	e-Move Inspect	ion Report are accur	ate and binding	J.	
Date:				Date:			
Corpo	oration's Represent	tative - Signature		upant's Signature		_	
Print I	Name:		Print	Name:		_	
			POST-MOVE	INSPECTION			
Post-I	Move Inspection Da	ate::		Time:			
Post-I	Move Inspection Re	eport:					
(a)	No defects to re	eport after the move	e □; or				
(b)	The following d	efects to the Servic	e Elevator were	e noted after the mov	/e:		
	acknowledge that I		accept the teri	ms identified in the F	Rule E ("Moving	and Service Elevator")	
I/We a	acknowledge that t	he results of the Po	st-Move Inspec	ction Report are accu	rate and bindin	g.	
Date:				Date:			
	oration's Represent			upant's Signature		_	
Print I	Name:		Print	: Name:		_	