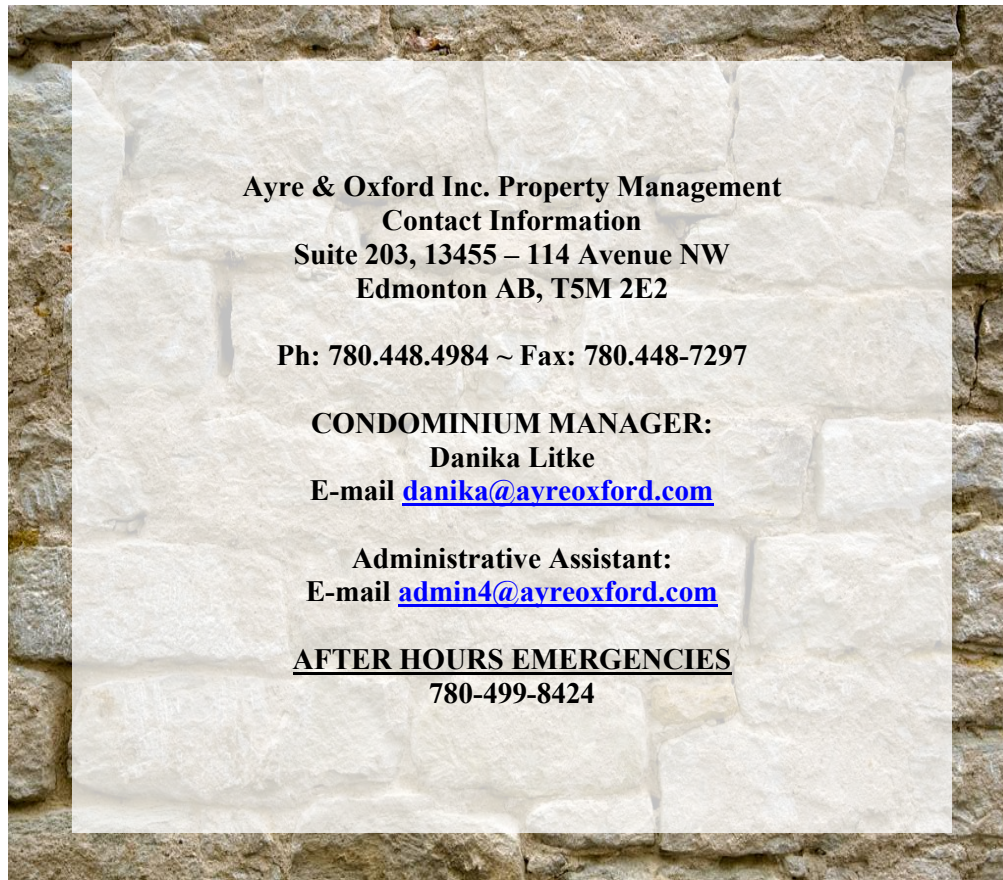


# Ospin Terrace Condominium

## **Welcome** *to your new home at Ospin Terrace Condominium*

You will find some important information and forms in this package as it pertains to your new property. This package simply highlights a few of the provisions of the Bylaws and policies of the Corporation. Please ensure that all applicable forms are submitted to the Administrative Assistant for your property. Please also ensure you have read and understand your Corporation Bylaws.

Please keep this package handy for contact and information purposes.



**1. Move in/ Out Etiquette:**

1. Please pay close attention to balconies with moving trucks. Damages resulting from vehicles/trucks are charged backed to the unit owner.
2. No driving on the grass.
3. Any other damages incurred will be the responsibility of the unit owner.
4. Notice of the move has been provided to Ayre & Oxford at least 72 hours in advance, and reservation and padding of the elevator was arranged by contacting the maintenance coordinator, or the office of Ayre & Oxford Inc. between Monday and Friday.
5. Our reservation is held within the hours of 9am and 8pm in consideration of other residents/owners, and we will remain within our scheduled time period.

**2. Emergencies:**

- a. If there is a police, fire, or medical emergency, call **911**.
- b. Report incidents occurring after business hours requiring immediate action to the after-hours emergency staff.
- c. Non emergency reports should be made in writing to your Property Manager the following business day for record purposes.

**3. Non-Smoking Building**

- a. There is no smoking in the units or common areas.

**4. Noise and disturbance:**

Daily living and its associated noises are expected and suggested to remain from 8am to 11pm. Outside of this timeframe should be quiet hours.

**5. Complaint Procedure:**

- Notify Property Management of the complaint in writing, noting as much detail as possible, including dates, times, type of noise, and pictures if applicable.

**Report to:** Ayre & Oxford Inc.:

Danika Litke, Condominium Manager: [danika@ayreoxford.com](mailto:danika@ayreoxford.com)

Jordan Hammel, Administrative Assistant: [admin4@ayreoxford.com](mailto:admin4@ayreoxford.com)

- If the complaint is for noise after 11:00pm, in addition to reporting the occurrence to the Property Management, report it to the police during the occurrence. Police reports can be used to substantiate complaints should further action be required to rectify the issue and can also result in additional City Bylaw fines.
- **The police non-emergency phone number is 780-423-4567.**

**6. Types of Common Complaints:**

- Late night/early morning exterior noise, which carries from yards and balconies.
- Offensive or inappropriate language use.
- Music and loud base.
- Dogs barking or other animal noises.
- Garage / yard or balcony parties.
- Parties indoors with windows open during late nights.

**7. Board of Directors Action:**

- Complaint #1. First letter (a letter of warning) is issued, stipulating fine for next complaint.
- Complaint #2. Second warning
- Complaint #3. **FINE.**
- Subsequent Complaints: Depending on the nature of the complaint, or alternate action thereafter i.e.; if tenant renting, eviction.

## **8. Payment**

Common Expense Levies (condo fees) can be paid via post-dated cheques or Electronic Funds Transfer. Payment for all other items including but not limited to move fees, fobs and keys, chargebacks, parking, etc. can be paid by cheque made out to:

Ospin Terrace C/O Ayre & Oxford Inc.  
#501, 4730 Gateway Blvd NW.  
Edmonton Alberta, T6H 4P1

Please note that any payment that is returned is subject to a \$35.00 NSF processing charge, as well as any interest charges as set out in the Corporation Bylaws.



## Ospin Terrace Condominiums Contact Information

Suite No.: \_\_\_\_\_

### OWNER INFORMATION

Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_

SEND MAIL TO CONDO ADDRESS? Circle YES or NO -If you circled no, please enter mailing address below

Address: \_\_\_\_\_

\_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Primary Phone No.: \_\_\_\_\_ Secondary Phone No.: \_\_\_\_\_

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

**\*\*Anti-Spam Email Legislation Consent:** By providing my email address I am granting permission for Ayre & Oxford Inc. to email me for communication purposes related to the property. To remove consent, please notify our office requesting removal of your email from our system.\*\*

Emergency Contact/Agent: \_\_\_\_\_

Emergency contact daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_

**OWNER OCCUPIED UNIT Please circle YES or NO (if you circled no please complete the section below)**

### RESIDENT INFORMATION, (if different from Owner):

Name(s): \_\_\_\_\_

Daytime phone: \_\_\_\_\_ Evening phone: \_\_\_\_\_

### CARS OWNED OR USED BY OWNER/RESIDENTS which are parked at or near the condominium:

#### Car #1.

Parking stall location & number: \_\_\_\_\_

Make & Model: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate: \_\_\_\_\_

#### Car #2.

Parking stall location & number: \_\_\_\_\_

Make & Model: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate: \_\_\_\_\_

### INTERCOM: (local number only)

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

The information requested is for our records only. In order to ensure confidentiality to all tenants, site staff has been instructed not to provide personal information contained in our files. **Once completed, please sign and return the form attention to Jordan Hammel, contact info provided on the letter head, or e-mail [admin4@ayreoxford.com](mailto:admin4@ayreoxford.com).**

## Ospin Terrace

#501, 4730 Gateway Blvd. NW Edmonton AB T6H 4P1

Phone (780) 448-4984 • Fax (780) 448-7297

[www.ayreoxford.com](http://www.ayreoxford.com)

[www.ayreoxford.com](http://www.ayreoxford.com)



### Alberta Treasury Branch Pre-Authorized Chequing / Authorization for Debit Transfer

Unit #: \_\_\_\_\_ Building #: \_\_\_\_\_

Surname: \_\_\_\_\_ First Name: \_\_\_\_\_ Initial: \_\_\_\_\_

Name: \_\_\_\_\_

Complete if the name the account is under is different from Condominium Owner's name

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ (work): \_\_\_\_\_

Email: \_\_\_\_\_

**CIRCLE YES or NO**

- |  |     |    |
|--|-----|----|
| 1. New Pre Authorized Plan for Ayre & Oxford Inc.? | YES | NO |
| 2. Bank Information Change (If Applicable)?        | YES | NO |

**THESE SERVICES ARE FOR:**

**CHECK ONE:**

\_\_\_\_\_ Personal Use **OR** \_\_\_\_\_ Business Use

I, \_\_\_\_\_; Hereby authorize Alberta Treasury Branch (ATB) and: Ayre & Oxford Inc., #501, 4730 Gateway Blvd NW; Edmonton, AB T6H 4P1, Telephone: (780) 448-4984

To transfer monies in the amount of the monthly condominium fees from my account at the following location on the 1<sup>st</sup> of every month or next business day: **Please note outstanding balances CAN NOT be paid through Pre-authorized and must be paid by either cheque/money order or Condo Café.**

Financial Institution Name: \_\_\_\_\_

Acct No: \_\_\_\_\_ Transit # (5 digits): \_\_\_\_\_ Financial Inst # (3 digits): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

I authorize Ayre & Oxford Inc. and ATB to use the services of any member or affiliate of the Canadian Payments Association (CPA) in carrying out this authorization. I agree to be bound by the standards, rules and practices of the CPA as they may exist from time to time. I agree to give written notice of cancellation of this authorization to Ayre & Oxford Inc. and to be bound by this authorization until Ayre & Oxford Inc. has had reasonable time to act on the notice. Ayre & Oxford Inc. and/or ATB may terminate this authorization by providing me with ten (ten) days notice.

You, the Payor may revoke your authorization at any time in writing subject to providing notice of 10 days. You have certain recourse rights if any debit does not comply with this agreement. You have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD agreement. To obtain more information on your resource rights you may contact your financial institution or visit [www.payments.ca](http://www.payments.ca)

I undertake to inform Ayre & Oxford Inc. within ten (10) days of any changes to branch, account and institution number while this authorization is in effect.

**It is the Condominium Owner's responsibility to notify Ayre & Oxford Inc. of cancellation or changes to the Pre-Authorized account on or by the 23<sup>rd</sup> of the current month.**

**I understand there will be a service charge of \$35.00 if any withdrawal is returned. (This service charge is subject to change without notice.)**

Commencement Date: \_\_\_\_\_, 20\_\_\_\_ (This form must be received by the 23<sup>rd</sup> of the month before the commencement date.)

Signature: \_\_\_\_\_ Signature of Joint Acct Holder (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Signer: \_\_\_\_\_ Printed Name of Signer of Joint Acct Holder: \_\_\_\_\_

Please send completed form to [receivables@ayreoxford.com](mailto:receivables@ayreoxford.com)

**A VOID CHEQUE or BANK CONFIRMATION MUST BE ATTACHED**

#501, 4730 Gateway Blvd. NW Edmonton AB T6H 4P1

Phone (780) 448-4984 • Fax (780) 448-7297

[www.ayreoxford.com](http://www.ayreoxford.com)

[www.ayreoxford.com](http://www.ayreoxford.com)



## Ospin Terrace Condominium Move In / Move Out Form

Suite No: \_\_\_\_\_ Move Date: \_\_\_\_\_ Please Circle: Move-In / Move-Out

Owner Name: \_\_\_\_\_ Tenant Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

I/We \_\_\_\_\_, hereby declare the following move in/move out etiquette are to be followed through the duration of our move.

1. Notice of the move has been provided to Ayre & Oxford at least 72 hours in advance, and reservation and padding of the elevator was arranged by contacting the maintenance coordinator, or the office of Ayre & Oxford Inc. between Monday and Friday.
2. Our reservation is held within the hours of 9am and 8pm in consideration of other residents/owners, and we will remain within our scheduled time period.
3. We acknowledge receipt of the elevator key.
4. We acknowledge the move in or out fee is \$100.00 deposit refundable after the final walkthrough.
5. Elevators held open without a key cause major repair issues; therefore if we are found holding open the door, we will be charged for the elevator company inspection and any resulting repairs required. We acknowledge that these repairs have been known to be in excess of \$500.00.
6. We acknowledge that no doors are to be propped open and unattended including the elevator vestibule doors and the building exit doors. Breach of such policy will result in a fine of \$250.00.
7. The following areas were inspected for damages and cleared of all disrepair. Should damages be found during the walk through further to the move, it will be the responsibility of the unit owner, who may in turn charge back the tenant as per their personal agreement to incur the fees of the damages.

	Prior to Move	Further to Move
a) Walls clear of makings/damages	LI Yes LI No	LI Yes LI No
b) Flooring clean and clear of damage	LI Yes LI No	LI Yes LI No
c) Elevator clear of scratches	LI Yes LI No	LI Yes LI No
d) Time move began	_____ (Key Provided)	_____
e) Time move was completed	_____ (Key Returned)	_____
f) Elevator key and door wedges	LI Yes LI No	LI Yes LI No

Notes:

**\$100.00 moving fee: Paid \_\_\_\_\_ Please make cheques payable to Ospin Terrace Condominium.**

**Prior to Move:** Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_ in the presence of the Ospin Terrace Maintenance Coordinator.

x \_\_\_\_\_  
Owner and/or Tenant

x \_\_\_\_\_  
Maintenance Coordinator

**Further to Move:** Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_ and submitted to the Ospin Terrace Maintenance Coordinator.

x \_\_\_\_\_  
Owner and/or Tenant

x \_\_\_\_\_  
Maintenance Coordinator

#501, 4730 Gateway Blvd. NW Edmonton AB T6H 4P1

Phone (780) 448-4984 • Fax (780) 448-7297

[www.ayreoxford.com](http://www.ayreoxford.com)

[www.ayreoxford.com](http://www.ayreoxford.com)



## ***Ospin Terrace Condominium – Suite Renovation/Alteration Form***

---

Date of Application: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

Interior Enhancement: \_\_\_\_\_

**DESCRIPTION OF PROJECT(S)** – Exterior: (Deck, Fence, Sun/Screenroom, Other)

**Permit Required:** YES \_\_\_\_\_ NO \_\_\_\_\_ (If yes, enclose copy for file)

**Material(s) to be used in construction:**

**NOTE:** low, minimal or maintenance free materials must be used in construction, and must meet with municipal and provincial codes & requirements

**Color(s): NOTE:** If enhancement is exterior, it must coordinate to existing exteriors

**Dimensions, Specifications:**

(attach a detailed sketch or drawing of the project showing dimensions, including proximity to adjoining properties. If interior enhancements involve structural changes, an engineer's report may be required.)

**Contractor(s) or persons responsible for construction and contact numbers:**

**Estimated completion date of project(s):**

**NOTE:** owner(s) accepts responsibility for timely completion of construction project

**Units that may be affected and/or impacted by construction:** \_\_\_\_\_

**Owner(s) to complete the following section:**

I/we, \_\_\_\_\_, as homeowner(s) of Unit \_\_\_\_\_, accept all responsibility for construction and associated costs including permits as well as any/all related maintenance of these projects. I/We also accept full liability for any and all damages caused as a result of the failure of any electrical, plumbing and/or structural components changed during the course of the renovation.

When these enhancements are complete, these projects will be discussed with my/our insurance agent. If applicable my/our insurance coverage will be increased to cover replacement costs associated with these items. I/We are aware and accept full responsibility for any additional insurance premiums incurred as a result of these improvements to my/our property and unit.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Owner's Signature

**Office to complete the following section**

Board members concerns and/or any related conditions of approval OR denial and reason for denial:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved / Denied (Please circle and initial one)

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, \_\_\_\_\_  
(Property Manager)



## **Ospin Terrace Condominium Floor Covering Specifications**

Floor coverings in the interior of any unit shall not be replaced with less resilient coverings than the pre-existing coverings without the prior consent of the Board. For the purpose of this policy: ceramic tile, marble or the like shall be considered less resilient than vinyl tile, hardwood flooring or the like which shall be considered less resilient than carpeting, carpeting and under pad, or the like.

Where hard floor coverings are allowed by permission of the board, and where they are located in any unit that is above another unit, the floor coverings must be installed using a resilient underlay which has a laboratory tested rating of "Impact Insulation Class" (IIC) of 70 or higher, and a Sound Transmission Class (STC) of 65 or higher.

The floor covering must "float" on the isolated underlay with no fasteners or other bridging through to the structure. For solid hardwood floors and tiles floors, this can be achieved by installing the resilient underlay below the subfloor.

Occupants with hardwood floors topping (hardwood, vinyl, ceramic tile and laminate) must recognize that the floor impact resulting from their activities are more readily transmitted to units below and active steps to limit the noise of these impacts must be taken. Please note: the under pad requirement must have a Impact Insulation Class (IIC) of 70 or higher and a Sound Transmission Class (STC) OF 65 or higher.

**\*\*Pet Policy\*\***

**Ospin Terrace Condominium Corporation  
Condominium Plan # 082 9395**

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Pursuant to Section 31 of the Ospin Terrace Condominium Corporation, this policy regarding Animals/Pets within the complex shall be a Board Policy and shall be a guideline for the Owners of the Corporation as a whole.

**Registration and Approval of Pets:**

1. All pets must be registered with the Board and a registration form must be completed for each pet including a picture of the animal.
2. Any new animals must be approved by the Board of Directors as stated in the Corporation By-Laws Section 31.
3. Owners are responsible for their pet regardless of kind/ type.

**Number and Size of Pets:**

1. Restricted to a maximum of one animal total.
2. All pets must be maximum 14" in height to the shoulder when fully grown.

**Restrictions to animals:**

1. All dogs and cats must be licensed with the City of Edmonton and be rabies vaccinated.
2. All Animals must comply with the City of Edmonton animal licensing and control bylaw #13145
3. Any animals who exhibit aggressive or vicious behavior will not be allowed within the complex.
4. Visiting and/or babysitting pets is not allowed under any circumstances.

**Noise:**

1. Pets that make noise continuously and/or incessantly to the disturbance of any person at any time of day or night will not be permitted.

**Control of animals:**

2. Pets must be confined to the pet owners unit and must not be allowed to roam free or be tied unattended in any common areas. Pets in transit outside your unit are to be carried, restrained by a leash or placed in an animal carrier.
3. Pet owners are responsible for any damage to the common elements caused by their pets.
4. No pet shall be allowed to become a nuisance or create any unreasonable disturbance such as personal injury or property damage caused by unruly behavior.
5. Pets in common areas are to be in complete control of a responsible human companion.

**Cleanliness:**

1. Under no circumstances is an owner, their family members, tenants, or visitors to deposit any animal feces or like materials outside the fenced area of their patio. Such actions will constitute immediate fines.

2. All feces must be cleaned up and deposited in a secure plastic bag, tied and then deposited in the waste bins provided in the complex. Cat litter may not be deposited in toilets.
3. No animal is to be allowed, to defecate or urinate on any part of the common property. All animals must be taken off common property for walks. In the accidental incident that while being walked the animal does defecate, the droppings must be immediately picked up in a plastic bag and deposited in the nearest waste receptacle. If a dog urinates on walkways or on walls it must be immediately rinsed down with water.
4. Under no circumstances are animals to be fed outside the unit.

**Fines:**

1. When a complaint regarding an animal is received, a letter will be sent to the owner of the animal involved explaining the complaint. Upon a second occurrence, a fine will be sent out. If complaints continue, the Board will have no other recourse but to require that the animal involved be removed from the premises.
2. As expressed in the above correspondence, we will impose by-law infraction fines as followed.
  - 1<sup>st</sup> Offence – Written warning.
  - 2<sup>nd</sup> offence - \$250.00 by-law fine will be imposed
  - 3<sup>rd</sup> offence – Removal of the animal involved

**Enforcement of the policy**

1. It is the responsibility of everyone within the complex to monitor and report any offences to the Management Company via e-mail or written letter.
2. Verbal complaints are not accepted and will not be looked into until a written complaint is made.

## PET REGISTRATION/APPLICATION

Condominium Plan No. 082 9395 Ospin Terrace Condominiums

Unit Owner: \_\_\_\_\_

Unit Address: \_\_\_\_\_

I hereby request permission to keep in the aforementioned described condominium unit a pet of the following description (**Note: Please submit a photograph with this application.**):

Common Name: \_\_\_\_\_

Breed: \_\_\_\_\_

Approximate Size: \_\_\_\_\_

Color: \_\_\_\_\_

Age: \_\_\_\_\_

Up to date immunization shots: Yes \_\_\_ No \_\_\_ (check one) License # \_\_\_\_\_

Other Description: \_\_\_\_\_

**In consideration of this permission being granted I agree:**

1. That at all times when this animal is not in the Unit, or contained in the privacy area, it shall be kept on a leash while coming to or leaving the property.
2. That I will pay immediately for any damage done by said animal to the common property or person.
3. That I will indemnify and save you harmless from any and all claims which may be against the Condominium Corporation by reason of the Condominium Corporation permitting me to keep said animal in my Condominium Unit.
4. That permission granted by the Board of Directors on behalf of the Condominium Corporation may be revoked at any time, at the Board of Director's discretion.
5. That I shall not permit my animal to run at large on any part of the property.
6. Continual barking is acknowledged as disturbing the quiet enjoyment of Condominium Owners, and the Condominium Corporation has the right to withdraw approval of pets that are deemed to be a problem.
7. Animals are not allowed to defecate on Common Property, and if so it is the Owners responsibility to remove it immediately.
8. **That I have read and understand By-law Section 31.1, which states, but is not limited to, the fact that only one pet is permitted per unit and dogs must not be greater than 14" high at the shoulder.**

Per Unit Owner \_\_\_\_\_

Per Unit Owner \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. Per: \_\_\_\_\_ (Property Manager)

on behalf of The Owners: Condominium Plan 082 9395 Ospin Terrace Condominiums

**NOTICE OF INTENTION and APPLICATION TO RENT/LEASE  
Ospin Terrace Condominium Plan No. 082 9585**

1. We, \_\_\_\_\_, as owner(s) of

Unit Number \_\_\_\_\_, intend to rent/lease the unit to:

\_\_\_\_\_  
(Name(s) of proposed tenant/lessee)

2. A copy of the proposed rental agreement/lease showing the terms thereof, the amount of the rental to be paid and the circumstances under which it may be terminated prior to expiry is attached.

3. My/Our mailing address for service of legal process is:

\_\_\_\_\_  
4. I/We indemnify it against any damage sustained by the Corporation or any other person as a result of the tenant's/lessee's breach of any Bylaw or any damages resulting from negligence or nuisance committed by the tenant/lessee.

5. I/We understand and agree that any unpaid charges resulting from damage sustained by the Corporation or any other person as a result of the tenant's/lessee's breach of any Bylaw or any damages resulting from negligence or nuisance committed by the tenant/lessee will be applied against Condominium fees paid; resulting in action taken as per the Corporation. The Corporation also has a charge against the estate of the defaulting owner, for any amounts that the Corporation has the right to recover under these by laws. The charge shall be deemed to be an interest in the land, and the Corporation may register a caveat in that regard against the title to the defaulting owners unit. The Corporation shall not be obliged to discharge the caveat until all arrears, including interest and enforcement costs have been paid.

6. I/We have fully explained to the prospective tenant/lessee the provisions of Sections 53, 54, 56 of the Condominium Property Act and we have provided the tenant with a copy of the Corporation's Bylaws.

7. I/ We understand that the Residential Tenancies Act may affect us and our tenant. If there is a conflict between the Residential Tenancies Act and the Condominium Property Act, the Condominium Property Act applies.

DATED at Edmonton this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

SIGNATURE OF OWNER

SIGNATURE OF CO-OWNER

\_\_\_\_\_

\_\_\_\_\_



## **Ospin Terrace Condominium Confirmation of Bylaw Receipt**

To: Board of Directors: Ospin Terrace Condominium

Unit # \_\_\_\_\_

Address: \_\_\_\_\_

In consideration of the attached application to lease unit # \_\_\_\_\_, please be advised of the following:

I / We \_\_\_\_\_  
have received a copy of the Corporation bylaws, for review.

I / We \_\_\_\_\_ agree to undertake the bylaws.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Witness Signature: \_\_\_\_\_



**Unit Owner's Cease to Rent Notification**  
**Ospin Terrace Condominium**

To: Board of Directors: Ospin Terrace Condominiums

Unit # \_\_\_\_\_

Address: \_\_\_\_\_

I / We \_\_\_\_\_

Cease to rent the aforementioned suite effective: \_\_\_\_\_ date.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Witness Signature: \_\_\_\_\_





## PROPERTY RESIDENT COMPLAINT FORM

Today's Date: \_\_\_\_\_ Building Name / Address: \_\_\_\_\_

Name: \_\_\_\_\_ Suite: \_\_\_\_\_ Owner or Tenant? \_\_\_\_\_

E-mail address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Complaint Against Suite #: \_\_\_\_\_ Type of complaint: \_\_\_\_\_

If the complaint is noise, describe the type of noise: \_\_\_\_\_

How frequent is this occurring? \_\_\_\_\_

How long does this occur? \_\_\_\_\_

At what time of day? \_\_\_\_\_

Location / source of the complaint? \_\_\_\_\_

How is it affecting you? \_\_\_\_\_

Is it affecting anyone else? \_\_\_\_\_

Other relevant details: \_\_\_\_\_

Have you discussed / communicated this with the source of the complaint if applicable? If yes provide details: \_\_\_\_\_

Are you willing to attend court in the event that this issue escalates to that point: \_\_\_\_\_

*The information collected here is for legal and record keeping purposes only. Your information will not be shared with the offenders unless required by law.*

### FOR OFFICE USE ONLY:

1<sup>ST</sup> COMPLAINT

2<sup>ND</sup> COMPLAINT

3<sup>RD</sup> COMPLAINT

4<sup>TH</sup> COMPLAINT

NOTES: \_\_\_\_\_

# **Air BnB Notice**

**Please be advised that Air BnB's will not be permitted, as the corporation has decided against them for the overall best of Ospin Terrace Condominiums.**

**Any short term rentals (less than one month) are not permitted.**

**We appreciate everyone's cooperation and should you know of a unit that is running an Air BnB please report it right away to our office so further action can be taken.**



**Sincerely,  
*Ayre & Oxford Inc*  
*Agents on behalf of Ospin Terrace***