



# Commonwealth Pointe II

## Welcome

*to your new home at Commonwealth Pointe II*

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.

**Ayre & Oxford Inc. Property Management  
Contact Information**  
#501, 4730 Gateway Blvd  
Edmonton, AB T6H 4P1

Ph: 780.448.4984 ~ Fax: 780.448-7297

**CONDOMINIUM MANAGER:**  
Laila Bonertz  
E-mail [laila@ayreoxford.com](mailto:laila@ayreoxford.com)  
(780) 448-4984 ext. 3260

Administrative Assistant  
Alexandra Bishop  
E-mail: [admin8@ayreoxford.com](mailto:admin8@ayreoxford.com)  
Extension 3130

**MAINTENANCE STAFF**  
Rob Grue

**AFTER HOURS EMERGENCIES**  
**780-499-8424**

## General Building Information

**1. Move In's / Outs Etiquette:**

- a. Book the elevator in advance by contacting Property Management. A key and elevator pads will be supplied to protect the elevator.
- b. Bookings are only between the hours of 9am and 9pm in consideration of other residents.
- c. A deposit in the amount of \$100.00 is required for the elevator key, which will be refunded immediately. Please note this must be in the form of a check as on site staff, do not accept cash.
- d. Elevators held open without a key may cause major repair issues; therefore, if you are found holding open the door, **you will be charged** for the elevator company inspection and any resulting repairs required. These repairs have been known to be **in excess of \$500.00.**
- e. Do not leave any doors propped open and unattended. Open doors must be attended at all times.
- f. **No driving on the grass or moving through patios.**
- g. Moving household goods in / out should be done with safety and courtesy. Any damages incurred will be the responsibility of the unit owner.

**2. Additional information:**

- a. Suite and mailbox locks/ keys are owner responsibilities to replace / maintain.
- b. Intercom programming changes: Call the Property Management office.
- c. Additional remotes and fobs can be purchased from the Property Management Office for a fee
- d. Purchase an additional FOB (\$75)

**3. Emergencies:**

- a. If there is a police / fire or medical emergency, call **911**.
- b. Non-emergency reports should be made to Property Management the following business day for record purposes.

**4. Noise and disturbance:**

Daily living and its associated noises are expected and suggested to remain from 7am to 11pm. Outside of this timeframe should be quiet hours.

- a. Parties or activities beyond 9pm should be conducted with due respect to your neighbors.
- b. Owners with complaint regarding noise in a unit after hours are asked to call the police and report it to Ayre & Oxford the next business day. Please document the date / time and nature of the complaint with as much details as possible.

**5. Renovations and Repairs:**

- a. Construction in units is to be between 8am to 5pm Monday through Saturday.
- b. If you are planning a renovation you are required to complete the Unit Alteration request Application and receive Board approval in writing prior to commencing the work.
- c. Unapproved renovations are subject to removal.
- d. If you are upgrading / renovating, please ensure your insurance is adjusted to reflect coverage on all items that are not remaining "builder's grade".
- e. Know your bylaws: **Structural/design changes to property**
- f. UNDER NO CIRCUMSTANCES are changes that affects the exterior of the building to be made. Per section 58 (b) of the bylaws that all owners have agreed to:

An owner shall not:

- (vi) Do any act or permit any act to be done which will alter the exterior appearance of the structure comprising his or any other units.

**6. Home based business:**

Please make your request in writing to the Building Management for approval by the Board. Approval will not be given to business which requires public attendance in the building.

**7. Air conditioners:**

Air conditioners cannot be mounted to hang outside of windows and must be fully inside your unit. They cannot alter the building in any way or cause excessive noise outside your unit that may disturb neighbors.

**8. Heating:**

It is the owner / residents responsibility to inspect their home for leaks and report them as soon as discovered. Take a moment and inspect your heating pipes, carpet areas and ceilings frequently and report any damages as soon as possible to avoid further damage and possible liability.

In the winter please make sure your heat is on. Do not leave any windows or patio doors open when you are not around. If you do need to open a window please monitor it closely as there have been problems with pipes freezing when there is a change in temperature. Damage done to your suite and other suites, as a result of frozen pipes that burst, as a result of negligence on the part of the resident or owners of the suite, is the responsibility of the owner and/or resident of that suite. Our temperature can change drastically from warm to cold in a hurry.

**9. Sprinkler Systems:**

All suites have sprinkler heads in them. Please familiarize where they are so that they can be kept free from objects around them. A burst sprinkler head can cause a lot of damage not only to your suite but to other suites and common areas. If the sprinkler head breaks as a result of negligence on the part of the occupant then they are responsible for the damage. A little common sense goes a long way for prevention.

**10. Pets:**

Pets, including visiting pets require approval of the Board. You will find a pet approval Form included in this package. Please also refer to the Corporation bylaws.

**11. Insurance:**

It is mandatory that all owners and tenants if renting have proper condo insurance. A copy of the insurance documents must be presented to the management company for their records. The Condominium Corporation carries Real Property All Risk Insurance, which provides coverage to the full replacement value of all real property in the condominium complex. This policy does not cover the individual unit owner in four important areas:

- Insurance coverage on your personal belongings, including furnishings.
- Insurance coverage for personal liability
- Insurance on Betterments, or improvements
- Insurance coverage for the amount of the deductible in the corporation's insurance claim for damage that originates in or from the Owner's unit.

## **Guidelines for enjoyment and use of Common Areas**

### **1. For sale / rent signage:**

Signs cannot be placed in windows, on the common property or surrounding grounds.

### **2. Balconies:**

- a) Balconies are considered common areas. They must be kept clean of junk not appropriate for this area. No storage, garbage, or hanging laundry. Etc. is allowed. Basically if it is an eyesore it's not allowed.
- b) We want everyone to be able to enjoy their balconies so common courtesy in respect to noise levels is appreciated. If it gets noisy take the party inside and close the sliding door.
- c) Loud noise after 9:00 pm is frowned upon, keep in mind noise travels and for the comfort of other residents please keep it down.
- d) **Satellite Dishes** are not allowed.

### **3. BBQ's:**

Propane BBQ's tanks are not allowed to be carried through the elevator. The propane must be carried up the stairs and not by elevator this is for insurance purposes. The BBQ should be kept away from the siding as it could melt. Any damage to the outside of the building from BBQ's is the responsibility of the owner's or residents of the suite with the damage.

### **4. Garbage...Garbage:**

Please DON'T put your garbage beside the dumpster – it won't get picked up by the garbage folks and ends up being strewn across the property. If we have to hire someone to clean up garbage left outside the bin or in the building that cost gets passed on.

Please DON'T put your garbage in the hallway, lobby mailbox area garbage or in stairwells.

### **5. Bulletin Board Etiquette:**

The bulletin boards are for communication to owners and any information posted should be respected. Please refrain from writing comments on existing postings.

### **6. Parking lot speed:**

Please remember that the speed limit in the parking lot is 10km/hour.

### **7. Visitors Parking:**

Visitors' parking is for "visitors" only. If you have a guest staying over night for more than 2 nights per week or 5 nights per month, please be courteous and direct them to park in an alternate location or consider renting a stall from the Corporation. If the sign in sheet is gone, please have your visitor place a visible piece of paper on the dash indicating where they are visiting. Any exemptions require Board approval ie Visitor from out of town. As well, they are not permitted to back in as the car exhaust is then directed into the main floor suites.

### **8. Security:**

The security of the building is relevant to everyone to make sure to avoid allowing strangers into the building.

- a. Don't allow people to follow you through doors.
- b. Wait for the gate to close before entering/exiting the parking lot.
- c. Report suspicious activity to the police.



## RENTAL POLICIES AND REGULATIONS

1. Application for rental units will be made by owners using the format of the Notice of Intention and application to rent form provided by the Board of Directors. Applications will not be processed without all of the required information. You will find the necessary forms attached.
2. **A deposit will be required in the amount of \$1000** and is to accompany the notice of intention and application to rent form.
3. Tenants / Lessees' will be required to sign an undertaking in agreement to be bound by the bylaws, rules, regulations and rental policies of Commonwealth Pointe II Condominiums.
4. Notice to vacate will be sent by registered mail, three months in advance, should this be deemed necessary by the Board of Directors upon review of the rental agreement.
5. All other notices by the Corporation to give up possession will be given in compliance with section 54 of the Condominium Property Act:

*54 (1) The Corporation may give a tenant renting a unit notice to give up possession of that unit if any person in possession of the unit;  
Causes damage, other than normal wear and tear, to the real or personal property of the Corporation or to the common property, or  
Contravenes a bylaw.*

*(2) When the Corporation gives a tenant notice under subsection (1),  
The tenant shall give up possession of the unit, and  
Notwithstanding the Residential Tenancies Act or anything contained in the tenancy agreement between the tenant and the tenant's landlord, the tenancy agreement terminates, On the last day of the month immediately following the month in which the notice is served on the tenant.*

*(3) A notice given under subsection (1) shall be served on the tenant and the tenant's landlord.*

### **Thinking of selling?**

You should always keep Corporation Documents that you receive during your Ownership, as many of them are provided free of charge initially, but may carry a fee for additional copies. To order condominium documents when going through the sales process, please go to [www.ayreoxford.com](http://www.ayreoxford.com) and select the Condo Docs button on the top of the main page.

**Commonwealth Pointe II  
Contact Information Update Form**

How would you like to receive your Condominium Correspondence?

☐

EMAIL ONLY

☐

MAIL ONLY

**\*\* Please ensure that your address filed with Land Titles is kept up-to-date at all times to ensure you receive important Legal documents pertaining to your Property, which will continue to be mailed to the Address registered on Land Title. \*\***

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

**OWNER INFORMATION**

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

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

Mailing Address (if offsite): \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

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

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

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

Emergency contact primary phone: \_\_\_\_\_ Secondary phone: \_\_\_\_\_

**TENANT / RESIDENT INFORMATION, (if different from Owner):**

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

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

Please be reminded that the Owner(s) is/are responsible to ensure the Tenant(s) receive all applicable correspondence.

**CARS OWNED OR USED BY OWNER/RESIDENTS parked on Condominium Property:**

**Car #1.** Parking stall number: \_\_\_\_\_ Make/Model: \_\_\_\_\_

Colour: \_\_\_\_\_ License Plate Number: \_\_\_\_\_

**Car #2.** Parking stall number: \_\_\_\_\_ Make/Model: \_\_\_\_\_

Colour: \_\_\_\_\_ License Plate Number: \_\_\_\_\_

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

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

The information requested above is required as per your Bylaws and the Condominium Property Act. Please ensure you submit a new form with any changes to any of the above information. Changes are accepted in writing only, to ensure no discrepancies.

Once completed, please sign and return the form to [admin8@ayreoxford.com](mailto:admin8@ayreoxford.com), or via fax, regular mail, or drop it off to our office, contact information provided on the letter head.

**Commonwealth Pointe II  
PET REGISTRATION**

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

Owner Name(s) and Contact Info: \_\_\_\_\_

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.)**

Name: \_\_\_\_\_ Type (cat/dog): \_\_\_\_\_

Weight: \_\_\_\_\_ Height: \_\_\_\_\_ Color: \_\_\_\_\_ Age: \_\_\_\_\_

City License Number: \_\_\_\_\_

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 the Corporation 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. Pets must be taken off of the property to use the washroom. Owners are responsible for cleaning up any accidents.

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

Permission to maintain the above-described pet, subject to the Condominium Bylaws and aforementioned conditions, is hereby granted.

Property Manager: \_\_\_\_\_ Date: \_\_\_\_\_  
On behalf of the Board of Directors.

## Commonwealth Pointe II NOTICE OF INTENTION TO RENT/LEASE

1. I/We, \_\_\_\_\_ ' as owner(s) of Unit  
Number \_\_\_\_\_; intend to rent/lease the unit to:

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

2. A copy of the proposed rental agreement/lease showing the terms thereof, the amount of the rental to be paid, the circumstances under which it may be terminated prior to expiry and containing the proposed lessee's signature in agreement to undertake the bylaws, and the Condominium Rental Policy / Regulation is attached.
3. My/Our address for service of legal process is:
- \_\_\_\_\_
4. I/We undertake to pay the Condominium Corporation and to 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. Notice of Move in and move out must be notified two weeks in advance, at which time an elevator key will be provided if applicable to assist with the move.
6. 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.
7. I/We have fully explained to the prospective tenant/lessee the provisions of Sections 53, 54 & 55 of the Condominium Property Act and we have provided the tenant with a copy of the Corporation's Bylaws.
8. 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.
9. Attached is a cheque for the deposit in the amount of: \$500.00.

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

\_\_\_\_\_  
SIGNATURE OF OWNER

\_\_\_\_\_  
SIGNATURE OF CO-OWNER

Attachments: Proposed Rental Lease Agreement, Tenants insurance certificate, Undertaking outlined per section 2. Above & Certified Cheque



## Commonwealth Point II Tenants Receipt of Bylaws

To: Board of Directors: Commonwealth Pointe II Condominiums

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

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

In consideration of the attached application to lease unit # \_\_\_\_\_ at Commonwealth Pointe II Condominiums, please be advised of the following:

I / We \_\_\_\_\_  
have received a copy of the Corporation bylaws of Commonwealth Pointe II Condominiums for review.

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

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

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

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

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



## Commonwealth Point II Cease to Rent

To: Board of Directors: Commonwealth Pointe II Condominiums

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

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

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

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

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

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

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

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

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

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

**Commonwealth Pointe II**  
**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; 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**

***Commonwealth Pointe II  
Unit Renovation / Alteration Request Form***

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

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

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

Phone/Email : \_\_\_\_\_

Interior Enhancement: YES NO

**DESCRIPTION OF PROJECT(S) – Flooring/Fixtures/Electrical/Plumbing/Other**

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**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*

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**COLORS note:** If enhancement is exterior, it must coordinate to existing exteriors

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**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.)*

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**CONTRACTOR(S) or persons responsible for construction and contact numbers:** \_\_\_\_\_

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**ESTIMATED COMPLETION DATE OF PROJECT(S):**

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

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**UNITS THAT MAY BE AFFECTED AND/OR IMPACTED BY CONSTRUCTION:**

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**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)

## **Commonwealth Pointe II Condominiums 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 an Impact Insulation Class (IIC) of 70 or higher and a Sound Transmission Class (STC) OF 65 or higher.



**Commonwealth Pointe II  
Move In – Move Out Form**

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

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

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

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

1. A reservation of the elevator was made through the maintenance coordinator or by contacting the office of Ayre & Oxford Inc. Monday to Friday in advance.
2. A deposit of \$100.00 has been made to Management in the form of a cheque submitted with this form.
3. Our reservation is held within the hours of 9am and 9pm in consideration of other residents/owners and we will remain within our scheduled time period.
4. 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.
5. We acknowledge that no doors are to be propped open and unattended including the elevator vestibule doors.
6. We acknowledge receipt of the elevator key, which is to be return immediately upon the completion of the move and a briefing on the use.
7. The following areas were inspected for damages and cleared of all cause. Should damages be found during the walk through further to the move it will be the responsibilities of the unit owner who may intern 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
b) Flooring clean and clear of damage	LI	Yes	LI	No
c) Elevator clear of scratches	LI	Yes	LI	No
d) Time move began	_____		_____	
e) Time move was completed	Provided		Returned (If no \$30 charge each)	
f) Elevator key and door wedges	LI	Yes	LI	No

Notes: \_\_\_\_\_  
\_\_\_\_\_

**Prior to Move:** Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_ in the presence of Commonwealth Pointe II Maintenance Coordinator.

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

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

**Further to Move:** Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_ in the presence of Commonwealth Pointe II Maintenance Coordinator.

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

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

## Commonwealth Pointe II

### Owner Authorization to Receive Notices and Other Information by Email

I/We, \_\_\_\_\_ the Owner(s) of the following Unit(s)

\_\_\_\_\_  
(print legal and/or municipal unit description(s))

expressly authorize Ayre & Oxford Inc., operating as the Management Company for the "Corporation", to send any notice or correspondence required under the Bylaws, the Condominium Property Act, The Condominium Property Regulation, Court Process or as may otherwise be direction by the Board of Directors, to me/us at the email address listed below.

It is further acknowledged that I/we will check the email address periodically. Neither the Corporation nor its Board of Directors is responsible for Spam filter settings or any other problems (electronic or otherwise) resulting in an email not being received or read by me/us. It is my responsibility to update the Corporation if my email address changes.

#### Email Address:

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

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

*Note: If there is more than one person on title, a signature and/or email is required for each person.*

*If a unit is owned by a Corporation/Business, an individual authorized by the Corporation/Business must sign on behalf of the Corporation/Business.*

**Please note: By consenting to receive email communication from our office, you will no longer receive hard copies of Corporation Documentation, effective July 1<sup>st</sup>, 2019.**

*Signatures*

\_\_\_\_\_

**Once filled out, please send this form to: [admin8@ayreoxford.com](mailto:admin8@ayreoxford.com) or to the contact on the letterhead.**

For Office use:

Legal Unit Date received \_\_\_\_\_

**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:**

1ST COMPLAINT    2ND COMPLAINT    3RD COMPLAINT    4TH COMPLAINT

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

\_\_\_\_\_

\_\_\_\_\_