

# 9929 Saskatchewan Drive

## ***Welcome to your new home at 9929 Saskatchewan Drive***

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.

### **Key Resident Contact Information**

#### **Ayre & Oxford Inc**

Suite 501, 4730 Gateway Blvd NW  
Edmonton AB, T6H 4P1  
Ph: 780.448.4984 ~ Fax: 780.448.7297

#### **Angie Malone - Condominium Manager**

Ext. 3550 ~ Email:  
[angie@ayreoxford.com](mailto:angie@ayreoxford.com)

#### **Administrative Assistant**

Ext. 3190 ~ Email:  
[admin4@ayreoxford.com](mailto:admin4@ayreoxford.com)

#### **ON SITE STAFF:**

**Jerry Usyk**  
780-819-1180

### **Property Assistance Personnel**

If you have a flood or a similarly urgent issue which requires immediate assistance, please contact the onsite building superintendent.

The Condominium Corporation will always pay the staff for their time on-site, however please keep in mind that many concerns you would have within your suite are a unit owner's responsibility, as outlined in your bylaws. If personnel are called on-site solely to assist in completing an owner responsibility, the Corporation may have to charge your unit for the expense.

**If you are unsure** whether your concern is an owner issue, please ask the management office directly. **All non-urgent reports should be made via email or phone to the office for record purposes.**

### **Move In's / outs etiquette:**

- a) Move in/outs must be booked one week in advance so notice can be posted in the building.
- b) \$500.00 refundable deposit for the return of the elevator key, 4-hour maximum timeframe, between the hours of 8:00 a.m. until 5:00 p.m. Monday through Friday.
- c) Owners/residents must ensure the elevator is not locked out for long extended periods of time.
- d) Please ensure you do not block emergency fire lanes for any extended duration while conducting your move and be ready to remove your vehicle promptly if required.
- e) Damages resulting from vehicles or trucks onto any common property area, or any other damage incurred will be charged back to the unit owner.
- f) Do not leave any doors propped open and unattended.
- g) Do not dispose of any furniture or large items in the garbage room besides domestic garbage.

### **Noise and disturbance:**

Daily living and its associated noises are expected and suggested to remain from 8:00 a.m. to 11:00 p.m. Outside of this time frame should be quiet hours.

Parties or activities beyond 9:00 p.m. should be conducted with due respect to your neighbors.

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.

### **Emergencies**

If there is a police / fire or medical emergency, call 911.

Report incidents requiring immediate action to the onsite emergency staff.

Non-emergency reports should be made to Property Management the following business day for record purposes.

### **Rental Units:**

If you intend to rent your suite, please ensure you send confirmation to the Condo Corporation of your own and the tenants' contact information and receipt of the bylaws through Ayre & Oxford Inc within 21 days of the rental. Provide all contact details regarding any third parties involved in the suite as well: You will find a form attached for your reference.

If you are found to be renting out your suite without sending the Condominium Corporation the full contact information and confirmation required, please note that this may result in a fine of \$250.

### **Visitor Parking:**

Please remember to remind your guests to register their vehicle as soon as they park in the main lobby. Residents are not permitted to park in visitor stalls. Vehicles belonging to a Resident will be automatically tagged and towed with no further notice. Please review the parking signs on site for further instructions.

### **Unit Alteration**

Construction in units is to be completed between normal working hours. (8:00 a.m. to 5:00 p.m. Monday to Friday)

If you are planning a renovation you are asked to contact the building management prior to commencement for guidelines. This also applies to moving plumbing or electrical fixtures from one location to another.

If you are upgrading / renovating, please ensure your insurance is adjusted to reflect coverage on all items that are not remaining "builders' grade".

### **Lockboxes**

Lockboxes are not permitted anywhere on the property for realtors or contractors.

**Key Fobs Prices**

Grey teardrop fobs - \$50.00 each

Black box fobs - \$125.00 each

Flat access keys - \$25.00 each

**Attachments:**

**9929 Saskatchewan Drive Contact Information Sheet**

**Notice of Intention to Rent Form**

**Notice of Tenants' Receipt of Bylaws**

**Notice to Cease Rental Form**

**Electronic Funds Transfer Form** (Automatic Condo Fee Withdrawal)

**9929 Saskatchewan Drive**  
**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.: \_\_\_\_\_ Building (where applicable): \_\_\_\_\_

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

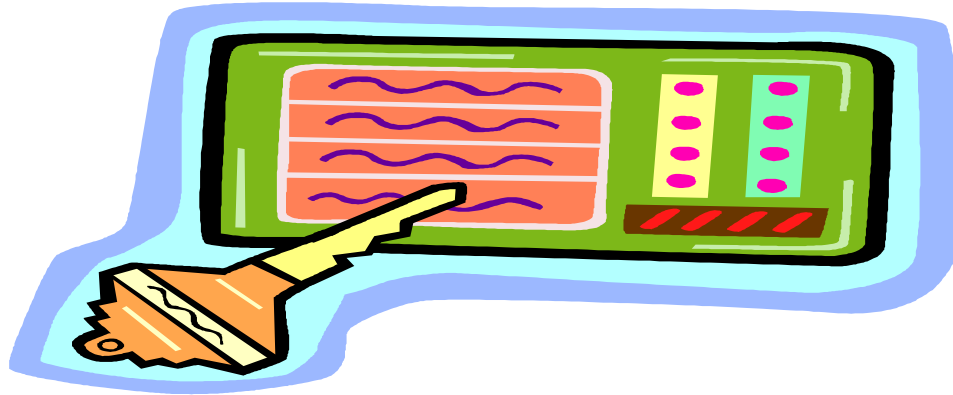
**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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 [admin4@ayreoxford.com](mailto:admin4@ayreoxford.com), or via fax, regular mail, or drop it off to our office, contact information provided on the letter head.**

# Intercom Update

## 9929 Saskatchewan Drive Condominiums



Please be advised an Intercom system is installed and all entrance doors to the building is secured.

The system works by using a digit number assigned to your suite which has to be entered by your guest. This will then activate the number you have registered with Ayre & Oxford Inc. You may then allow your guest access to the building by pressing "6" on your phone pad.

To activate your Intercom, we require the one (1) local telephone or cellular number you wish to use along with your name or "Occupied" to be displayed.

Please fill out the following information and return it to [admin4@ayreoxford.com](mailto:admin4@ayreoxford.com) or to the office at:

Ayre & Oxford Inc.  
Suite 501, 4730 Gateway Blvd NW  
Edmonton, AB T6H 4P1  
FAX: (780) 448- 7297

**\*\*Can only be hooked up to one (1) local number.**

Unit # \_\_\_\_\_  
Building \_\_\_\_\_  
Owner/Tenant Name(s) \_\_\_\_\_  
Name Displayed or "Occupied" \_\_\_\_\_  
Phone Number \_\_\_\_\_

**NOTICE OF INTENTION TO RENT/LEASE  
9929 Saskatchewan Drive**

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

\_\_\_\_\_  
(name and address 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 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 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 bylaws. 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 45 to 47 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 (one month's rent) in the amount of \$1000.00 or one month's rent which is ever greater.

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

SIGNATURE OF OWNER

SIGNATURE OF CO-OWNER

\_\_\_\_\_

\_\_\_\_\_

Attachments: Proposed Rental Lease Agreement, signed bylaw received. Tenant's insurance certificate

## **9929 Saskatchewan Drive – Tenants Receipt of Bylaws**

To: Board of Directors

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

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

In consideration of the attached application to lease unit # \_\_\_\_\_ at 9929 Saskatchewan Drive Condominiums, please be advised of the following:

I / We \_\_\_\_\_  
have received copies of the Corporation bylaws, and the Condominium Rental Policies/Regulation of 9929 Saskatchewan Drive Condominiums for review.

I / We \_\_\_\_\_ agree to undertake the bylaws and Rental Policies / Regulation.

Date: \_\_\_\_\_, 20\_\_\_\_.

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

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

Cease to Rent 9929 Saskatchewan Drive

To: Board of Directors: 9929 Saskatchewan Drive

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

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

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

My/Our mailing address for future correspondence is:

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

Contact Number: \_\_\_\_\_

I/We would like to request that our Rental Deposit be returned by *(check the applicable box)*:

☐ Mail to the above noted address.

☐ We would like to be notified when the cheque is ready and come to the Ayre & Oxford office to pick it up in person.

**FOR OFFICE USE ONLY**  
**RETURN OF RENTAL DEPOSIT CHEQUE REQUEST**

PROPERTY: \_\_\_\_\_

PAYEE: \_\_\_\_\_

DATE: \_\_\_\_\_

AMOUNT: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

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



## 9929 Saskatchewan Drive

### 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**