
Elevator Move-IN/Move-Out Contract for YCC217

I, _____ registered owner and occupant of suite # _____

at Y.C.C. 217 wish to Reserve the Elevator for: (Select one of the options below)

☐ **MOVE-OUT:**

- **SECURITY DEPOSIT: Certified Cheque or Money Order will be accepted only**
 - a **\$300.00 Security** deposit required upon booking the elevator
 - Should damages occur to the elevator or the building common areas during your move; your \$300.00 security deposit will be non-refundable.
- **Booking Hours:**
 - **Weekdays Monday – Friday:** (9:00am – 5:00pm)
 - **Weekends (Saturday) :** (10:00am – 5:00pm)
 - **Absolutely NO:**
 - **Move out allowed on Sunday & Holidays.**
 - **Move out allowed after 5:00 PM.**

☐ **MOVE-IN:**

- **SECURITY DEPOSIT:**
 - a **\$300.00 Security** deposit required upon booking the elevator
 - Should damages occur to the elevator or the building common areas during your move; your \$300.00 security deposit will be non-refundable.
- **Booking Hours:**
 - **Weekdays Monday – Friday:** (9:00am – 5:00pm)
 - **Weekends (Saturday) :** (10:00am – 5:00pm)
 - **Absolutely NO:**
 - **Move In allowed on Sunday & Holidays.**
 - **Move In allowed after 5:00 PM.**

By signing this elevator contract; I hereby acknowledge and agree to the above terms as set out by the Management of Y.C.C.217

Dated this _____ day of _____, 20____

(Signature of Unit Owner/Tenant)



YORK MILLS HEIGHTS
York Condominium Corporation No. 217

Office Use only

Damage Inspection:

Performed by: _____ on _____, 20__

Was any Damage found: YES / NO

If yes, specify the damaged areas:

Security Deposit Return:

Was Security Deposit Return: YES / NO

If yes,

Security Deposit Cheque/Money Order # _____

Date: _____, 20__

Signature of recipient: _____

Print Name: _____