

HALTON CONDOMINIUM CORPORATION NO. 504

THE BAXTER

OWNER INFORMATION FORM

OWNER INFORMATION

NAME _____ SUITE NO _____

MOVE IN DATE _____ NEW OWNERS / CLOSING DATE _____

HOME PHONE _____ CELL PHONE _____

EMAIL ADDRESS: _____ / _____

EMERGENCY CONTACT _____
NAME / ADDRESS & _____
PHONE NUMBER _____

OWNER ADDRESS (if applicable/please provide your mailing address)

Number and Street Name: _____

City and Postal Code: _____

NAMES OF ALL RESIDENTS IN SUITE

1. _____ 2. _____

3. _____ 4. _____

PET INFORMATION Dog _____ Cat _____ Other _____
Breed _____ Color _____ Name _____

BY-LAW NO. 8 RESTRICTS MAXIMUM PET WEIGHT TO 25 LB

WEIGHT INFO (lb.) _____ (In case of emergency I will be able to carry my pet) YES NO

VEHICLE INFORMATION

1. Parking Space: _____ Vehicle Model: _____ Color: _____ Vehicle License: _____

2. Parking Space: _____ Vehicle Model: _____ Color: _____ Vehicle License: _____

LOCKER: 1. _____ 2. _____

If you require assistance during an emergency, please indicate the Medical Problem:

SIGNATURE: _____ **DATE:** _____