HALTON CONDOMINIUM CORPORATION NO. 504

THE BAXTER

TENANT INFORMATION FORM

NAME	SUITE NO		
MOVE IN DATE	MOVING OUT DATE		
HOME PHONE	CELL PHONE		
EMAIL ADDRESS:			
EMERGENCY CONTA NAME / ADDRESS & PHONE NUMBER			
OWNER ADDRESS	(if applicable/please prov	ide information of Leas	se and Landlord info)
Landlord's Name & Addi	ress:		
NAMES OF ALL RI	ESIDENTS IN SUITE		
		•	
3		4	
PETS INFORMATI	<u>ON</u> Dog	Cat	Other
	Breed	Color	Name
	RICTS MAXIMUM PET		O VEC E NO E
WEIGHT INFO (lb.)	(In case of emerg	ency I will be able to c	arry my pet) YES \square NO \square
VEHICLE INFORM	<u>IATION</u>		
1. Parking Space:	Vehicle Model:	Color:	Vehicle License:
2. Parking Space:	Vehicle Model:	Color:	Vehicle License:
LOCKER: 1		2	
If you require assistance	e during an emergency, pl	ease indicate the Med	lical Problem:
SIGNATURE:		DATE:	