



Owner/Resident Contact Information Form

Condo 5 – YRVLCC 1193

The information contained on this form is strictly confidential and will be used by the YRVLCC 1193 Board of Directors and its designated FirstService Residential Property Manager for the sole purpose of discharging their duties and obligations as set forth in the declaration and bylaws established by the corporation. This form contains editable fields. It may be completed online and submitted by email to FirstService Residential at ballantrae.community@fsresidential.com. It may also be faxed to (416) 293-5904, placed in the FSR mailbox in the lobby way of the Recreation Centre, or mailed to FirstService Residential, 89 Skyway Ave., Suite 200, Toronto, ON M9W 6R4.

Registered Owner(s)	Owner 1	Owner 2
Last Name:		
First Name, Middle Initial:		
Email Address:		
Street Address:		
City:		
Postal Code:		
Home Phone:		
Cell Phone:		
Additional Contact Info:		

Emergency Contacts – Please note that this section is requested, but optional.

Emergency Contact(s)	Contact No. 1	Contact No. 2
Last Name:		
First Name, Middle Initial:		
Relationship:		
Home Phone:		
Cell Phone:		
Business Phone:		
Email Address:		
Additional Contact Info:		

For Non-Owner Occupied Property

Occupants	Occupant No. 1	Occupant No. 2
Last Name:		
First Name, Middle Initial:		
Home Phone:		
Cell Phone:		
Email Address:		
Additional Contact Info:		

I/we acknowledge that the above information will be used solely for the purpose of communication between the YRVLCC 1193 Board of Directors, the FirstResidential Property Manager and the individuals listed above, and will not be divulged to any other party without my/our written permission. I/we further understand that it is my/our responsibility to advise the Board and/or the Property Manager of any changes to this information.

Signature of Owner No. 1:		Date:	
Signature of Owner No. 2:		Date:	