



**Premiere Property Management Associates**  
A Division of 128431 Canada Incorporated

## *Owner Registration Form*

**Your contact information is important!** Please complete this form and return it to our office to ensure that we can reach you or your tenant(s) in case of emergency at your property.

**CCC No.:**

157

**Unit Address:**

**OWNER INFORMATION:**

**Please print clearly and include the name(s) of all registered owner(s)**

Registered Owner  
Name(s) only:

Mailing Address:  
(for non-resident owners)

Telephone:

H:

O:

C:

E-Mail:

*please print clearly*

Emergency Contact:

Name(s):

H:

O:

C:

**TENANT INFORMATION:**

***In accordance with the Condo Act, please complete and return the attached "Summary of Lease or Renewal" form if your unit is rented.***

\_\_\_\_\_  
Owner(s) signature(s)

\_\_\_\_\_  
Date

Please fax or scan your completed form  
dnelligan@premierepropertymgt.com

TO: **CCC # 157**  
c/o Premiere Property Management Associates  
2049 Meadowbrook Road, Ottawa, ON, K1B 4W7

*Condominium Act, 1998*  
**SUMMARY OF LEASE OR RENEWAL**  
(clause 83 (1) (b) of the *Condominium Act, 1998*)

1. This is to notify you that: *(mark whichever is applicable)*

☐ written or ☐ oral ☐ lease ☐ sublease ☐ assignment of lease

**OR**

☐ renewal of a ☐ written or ☐ oral ☐ lease ☐ sublease ☐ assignment of lease

has been entered into for Address \_\_\_\_\_ Unit \_\_\_\_\_, Level \_\_\_\_\_, being

Suite # \_\_\_\_\_ Parking Unit \_\_\_\_\_, Level \_\_\_\_\_ Locker Unit # \_\_\_\_\_, Level \_\_\_\_\_

on the following terms:

Name of lessee(s): \_\_\_\_\_

Telephone number: (H) \_\_\_\_\_ (C) \_\_\_\_\_ (W) \_\_\_\_\_

E-mail: \_\_\_\_\_

Commencement date: \_\_\_\_\_ Termination date: \_\_\_\_\_

Option(s) to renew: \_\_\_\_\_  
*(set out details)*

Rental payments: \$ \_\_\_\_\_ per month due on: \_\_\_\_\_  
*(set out amount and when due)*

Other information: \_\_\_\_\_  
*(at the option of the owner)*

2. I (We) have provided the lessee(s) with a copy of the declaration, by-laws and rules of the corporation.

3. I (We) acknowledge that, as required by subsection 83 (2) of the *Condominium Act, 1998*, I (we) will advise you in writing if the lease is terminated.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
*(signature of owner(s))*

\_\_\_\_\_  
*(signature of owner(s))*

\_\_\_\_\_  
*(print name of owner(s))*

\_\_\_\_\_  
*(print name of owner(s))*

\_\_\_\_\_  
*(address of owner(s))*

(H) \_\_\_\_\_ (C) \_\_\_\_\_ (W) \_\_\_\_\_

E-mail: \_\_\_\_\_