

## Off Site Owner & Tenant Information

Legal Owner(s) Personal Information

Date		Lease Start Date: Lease Expiry Date:				
Condominium Corporation:						
Last Name(s)			First Name(s)			
Mailing Address (including unit#, if applicable)		l				
City	Province			Postal Code		
Tenant(s) Personal Information						
ast Name(s) First Name(s)						
Property Address (including unit#, if applicable)						
City	Province			Postal Code		
Home#	Cell#			Work#		
e-mail address						
Do you agree to receive electronic notices at the email provided?  Yes No  Tenants License Plate Information						
Vehicle Make/Model/Colour				License Plate No.		
Vehicle Make/Model/Colour				License Plate No.		
Tenant(s) Signature				Dated		
Property Owner(s) signature  Please send completed application to:			Dated   Phone No. 613-791-2258			
Ludgate Management Services Inc. P.O. Box 46110 Beacon Hill Gloucester, ON, K1J 9M7			Email: admin@ludgatemanagement.ca			

## BE ADVISED THAT ANY INFORMATION PROVIDED WILL BE KEPT CONFIDENTIAL

I Certify that the information provided in this document is complete and accurate. I understand that my failure to provide complete and accurate information or to meet owner(s) requirements may result in not receiving important Condominium Documentation. I will also abide by the Corporations rules and regulations as per the Declaration and Condominium Act, 1998. If you have advised that you do reside off--site or rent any part of home, it is the legal owner's responsibility to make sure that their tenant(s) fill out an absentee owner form and tenants are aware of any rules and regulations relating to the Condominium Corporation.