

Moving Check List

(All requested information must be included, or the form will be returned to you for completion)

UNIT NO. _____ PROPERTY ADDRESS: _____

Name(s) of individual(s) moving: _____

Are you a Tenant (renter) or Owner? _____

Phone number of individual(s) moving: _____

Email address of person(s) moving: _____

You will receive an email confirmation of your move.

Today's Date: _____

Requested Move Date: _____

Requested Move Start Time: _____

Please circle the appropriate: Move In or Move Out or Delivery

****ALL MOVES / DELIVERIES MUST BE BOOKED WITHIN POLICY; EVEN FIRST FLOOR & FURNISHED UNITS****

****PLEASE ENSURE THE MOVE REQUEST HAS BEEN CONFIRMED PRIOR TO BOOKING MOVERS****

****A TENANT UNDERTAKING FORM MUST BE SUBMITTED PRIOR TO BOOKING A TENANT MOVE IN****

**** ELEVATOR KEY FOR LOCKING OFF THE ELEVATOR– IT WILL EITHER OPEN A PANEL DOOR TO ACCESS A KEYHOLE OR TOGGLE SWITCH OR WILL BE INSERTED DIRECTLY INTO THE MAIN PANEL TO SWITCH THE ELEVATOR TO INDEPENDENT SERVICE****

PLEASE BE AWARE OF ANY / ALL COSTS ASSOCIATED WITH THE MOVE.

IF YOU HAVE NOT BEEN ADVISED OF THE POLICY AND COSTS, PLEASE OBTAIN A COPY OF THE POLICY FOR YOUR PROPERTY.

LANDLORDS MUST PROVIDE THIS INFORMATION TO THEIR TENANTS(RENTERS)

**Return this document to:
FirstService Residential
Suite 810, 839 - 5th Avenue S.W.
Calgary, Alberta T2P 3C8
Fax: (403)299-1813
Submit Form to: absupport.fsresidential.com**