

TSCC 1831- 68 Broadview Ave Party Room Inspection Agreement (Security use only)

RESIDENT NAME: _____ SUITE NUMBER: _____ DATE: ____/____/____

PARTY START DATE: ____/____/____ PARTY START TIME: _____

PARTY END DATE: ____/____/____ PARTY END TIME: _____

DAMAGE DEPOSIT AMOUNT OF RECEIVED: _____ NAME ON THE CHEQUE _____

NAME OF GUARD ON PARTY ROOM DUTY WHO DID THE PRE/POST INSPECTION _____

The resident and a representative of the Corporation will together review the state of the following items/areas prior to the start of the party. Note any existing damage in the *Pre-party* section with an "X" and provide commentary in the space provided in the box to the right.

PRE-PARTY CHECK LIST:

DATE: ____/____/____

- Doors(Interior/exterior)
- Doors (Terrace)
- BBQ outside
- Walls
- Ceiling
- Floor
- Kitchen
- Bathroom
- Lights/fixtures
- Furniture
- Windows
- Washrooms
- Garbage Empty
-

AFTER PARTY CHECK LIST:

DATE: ____/____/____

- Doors (Interior/ exterior)
- Doors(Terrace)
- BBQ outside
- Walls
- Ceiling
- Floor
- Kitchen
- Bathroom
- Lights/fixtures
- Furniture
- Windows
- Washrooms
- Garbage Taken to
Basement

NOTE(S):

Any damages existing prior to the party will not be the responsibility of the Resident and only new damages listed on the "After Party Checklist" section will require Resident payment. Please note detail on existing and new damages in the space below.

TO AVOID DAMAGE TO THE CHUTE AND GARBAGE COMPACTOR LARGE BAGS CANNOT BE ACCOMODATED BY THE CHUTE AND GLASS ITEMS CANNOT BE THROWN DOWN THE CHUTE AS THIS CREATES BROKEN GLASS AND COSTLY DAMAGES.

HALLWAY

(Inclusive of entire area to and from party room and elevator)

- Carpet
- Walls
- Ceiling
- Lights/fixtures
- Unit/personal
- Terrace doors

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(Inclusive of entire area to and from party room and elevator)

- Carpet
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- Lights/fixtures
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SECURITY NOTE(S):

By signing this document the undersigned Resident agrees to responsibility for any NEW damages listed on this form that occurred as a result of the above-mentioned party. Furthermore, the Resident agrees to a deduction from the standard \$300 security deposit totaling the full amount of any damage, and any additional funds as required if said damages exceed the amount of the \$300 deposit. If no damages have occurred as a result of the "party" the \$300 security deposit will be refunded after inspection of the premises by a representative of the Corporation.

X

MANAGEMENT/SECURITY SIGNATURE

X

RESIDENT SIGNATURE

DATE: ____/____/____

DATE: ____/____/____