

RESIDENT MOVE-IN SUMMARY

Suite Number: 101

Contract Signing Date: 11 Nov 2024

Sales Name: R O

Contract Term:

☐ Yearly

☒ Monthly

☐ Weekly

☐ Daily

Tenancy Commence Date: 15 Nov 2024

Contract Expiry Date: 30 Nov 2024

1st Resident Name:

aa

FirstName bb

cc

LastName

11 Nov 1970

DOB

2nd Resident Name:

jj

FirstName kk

ll

LastName

11 Nov 1960

DOB

1st Month Payment:

☒ Received cheque # 789

11 Nov 2024

Total: \$ 980

Monthly Rate: \$250

Care Plan Rate: \$150

One Time Move in Fee: \$ 250

Parking/Scooter X () : \$36/1

Window Screen X () : \$33

Grab Bar X () : \$44

Others: \$ 60.32

1st Security Deposit:

☒ Received cheque # jj

11 Nov 1960

Total: \$ kk

1/2 Month Rental Deposit for 1st Resident: \$ 125.0

1/2 Month Care Plan: \$ 75.0

1/2 Month Rental Deposit for 2nd Resident: \$ 125.0

Move In/Out: \$ 500

Elpas X (1) : \$36

Garage Fob X (1) : \$32

Others: \$ 98

Payor Information:

☒ PAD

☐ Post Dated-Cheque

Payor's Name:R O

Bank Name:BOB

Bank ID # (3 digits):789

Account Number:23456789

Transit # (5 digits)12345

Others:

☒ Unit Key unit

☒ Elpas Fobe elpas

Resident Signature:sign

☒ Suite Insurance Copy Received 11 Nov 2024

☒ Suite Insurance Coverage Approved _____

Insurance Company NameBajaj

Policy Number:>8902890

Reviewed by:R O

Date:11 Nov 2024