

# RESIDENT INFORMATION SHEET

## TENANTS

### THE MARQUIS CONDOMINIUMS

In order to keep our records up to date we request that the following be completed, by Owners and returned to:

**PARTERRE PROPERTY SERVICES INC.**  
Suite 150, 720 28<sup>th</sup> Street NE. Calgary, AB T2A 6R3  
Or email to  
**wecare@parterreproperty.ca**

All information will be kept strictly CONFIDENTIAL.

Date: \_\_\_\_\_ Occupant's Name: \_\_\_\_\_

Unit #: \_\_\_\_\_ Street Address: \_\_\_\_\_

Contact Information:

Home Telephone #: \_\_\_\_\_ Business Telephone #: \_\_\_\_\_

Email: \_\_\_\_\_

Pets Type: \_\_\_\_\_ Name: \_\_\_\_\_

Vehicle (s) Make (1): \_\_\_\_\_ Model: \_\_\_\_\_ License #: \_\_\_\_\_

Make (2): \_\_\_\_\_ Model: \_\_\_\_\_ License #: \_\_\_\_\_

Parking Stall # (1): \_\_\_\_\_ Stall # (2): \_\_\_\_\_

Key Fob / Access Card #'s \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Number: \_\_\_\_\_

Relationship: \_\_\_\_\_

Please indicate if you or someone in your home requires assistance in the event of an emergency

If so who \_\_\_\_\_

I / We GIVE PERMISSION FOR THIS INFORMATION TO BE RELEASED TO THE BOARD OF DIRECTORS.

Signature: \_\_\_\_\_ Yes: \_\_\_\_\_ No: \_\_\_\_\_ (2017-06)