

ADDITIONAL KEY / DEVICE REQUEST FORM

Please complete this form and return it to the Rental Office

Date: _____ Phone: _____ Email: _____

Tenant's Name: _____

Suite: _____ at 755 Caledonia Avenue, Victoria, BC, V8T 0C2

Quantity	Type of Device	Cost	Total Cost
<input type="checkbox"/> _____	Building FOB <i>The number of FOBs requested in the lease were issued at no charge. Any extra FOBs are subject to the approval by the Property Manager.</i>	@ \$ 75.00 = \$ _____	(Non-refundable)
<input type="checkbox"/> _____	Suite Key <i>Suite keys according to your lease (# of occupants) were issued at no charge.</i>	@ \$ 10.00 = \$ _____	(Non-refundable)
<input type="checkbox"/> _____	Bike Room Key <i>Subject to bike registration</i>	@ \$ 20.00 = \$ _____	(Refundable Deposit)

I, the undersigned, have requested access device(s) as detailed above and accept full and complete responsibility for these device(s).

I also agree to the following:

- As there may be policies limiting the number of suite devices, if this request exceeds the maximum allowable the order will not be completed
- Should the device(s) become lost or stolen the undersigned will report of this incident immediately to the Resident Manager and/or Peterson Residential Property Management Inc.
- All additional devices are the property of Hudson Walk One and must be returned upon request of the Landlord or at the end of the tenancy. The replacement of any lost or stolen key or fob is subject to a non-refundable administrative charge of \$50.00 each

Requested By:

Tenant's Name: _____

Signature: _____

Date: _____

Received By:

Tenant's Name: _____

Signature: _____

Date: _____

OFFICE USE ONLY

Received by: _____ Date: _____

Payment Received: \$ _____ Form of Payment: _____ Receipt / Cheque #: _____

Fob/Transmitter Activated by: _____ Date: _____