

Permission To Enter Suite Authorization

Today's Date:	
Formal Move in Date:	
Suite No.:	Strata Lot:
As the \square owner / \square agent of the above listed Suite, I give permission for the Construction Deficiency Superintendent to access this suite to carry out the	
deficiency rectification until	
Name (Please Print)	Signature
Home or Cell Phone Number	Business Phone Number
Email Address	Fax Number
Suite is: ☐ Owner Occupied ☐ Tenant Occupied ☐ Not Occupied	

☐ Please call before entering suite* ☐ Please proceed with repairs	
*Name and Phone Number if call:	

CUSTOMER CARE CENTRE

To process, please Email, Fax or Mail to:

Email: <u>Amy.Wong.CG3@concordpacific.com</u>

Fax: (604) 899-9183

Mail To: ATTN: CONCORD GARDENS LIMITED PARTNERSHIP 9thFloor – 1095 West Pender, Vancouver, B.C. V6E 2M6