

Welcome Package

Welcome to Lighthouse West- TSCC 2794

15 Lower Jarvis St, Toronto, ON M5E 0C4

Phone: (416) 551-1526

LIGHTHOUSE TOWER

Property Management Ltd.

WELCOME TO LIGHTHOUSE WEST – TSCC 2794

QUICK GUIDE FOR NEW RESIDENTS

Important information from Management, Concierge and Results Fitness Staff:

Management Company- ICC Property Management Ltd.

The Office is located on the Mezzanine Level, and it is open Monday to Friday from 9 am to 5 pm.

Gabriela Stan- Condominium manager - 416-551-1526 - lighthousewest@iccpropertymanagement.com

Rahoul Sabhagchandani- Condominium Administrator – lhw.admi@gmail.com

Mark Daye – Regional manager - mdaye@iccpropertymanagement.com

Security& Concierge Staff – Elite Concierge

Mesfin Assefa - Security Supervisor

Concierge Desk 24/7 – 416-546-5903

R.S.D(Superintendent) - Ingerv

Junior (Jun) Tatel

For service requests, please go to BuildingLink (residential portal) > Resident Services > My repair requests

Amenities Coordinator information

The Amenities Coordinator's desk is located on the 3rd floor by the gym entrance.

Mon–Fri: 10 AM–6 PM | Sat–Sun: 11 AM–7 PM

Contact: **amenitieslighthousewest@gmail.com** | **437-427-9119**

Emergencies

For Business hours please call Management at 416-551-1526 or Concierge at **416-546-5903**.

For after-hours, please call Alternatively, you may call the after-hours ICC Emergency Line at **416-346-0323**

TSCC 2794 – BOARD OF DIRECTORS

Your Board of Directors and management are continuously working to make sure living in this building is fun and enjoyable. Your board consists of three (3), unit owners who volunteer their time, effort and expertise to aid in the day-to-day functions and responsibilities of the Corporation.

We would like to remind everyone that all board members are volunteers; as such, we thank them for their time and effort in supporting the community and working with I.C.C. Property Management.

Any communication to the Board of Directors from unit owners must go to Management to forward on.
Kurt Franklin – President
Nasim Naderi– Treasurer
Robert Monty Gill- Secretary

TSCC 2794 – BUILDING POLICIES

- **Fobs**
  The maximum number of Fobs assigned to a suite must equal the number of residents living in the suite.

- **Bulk Item Disposal**
  Only bulk items are permitted within the bulk disposal area located and properly marked at the loading bay. Mattresses and Christmas trees need to be properly wrapped before being discarded. Cardboard boxes, garbage bags and other minor items are prohibited in the area. The Corporation will charge a service fee for non-authorized items.

- **Suite Entry Access**
  Management and the superintendent on call are **ONLY PERMITTED** to provide unit access for residents during emergencies such as **FIRE**, **FLOOD** and **DEATH**.
  Residents who lose or misplace their unit keys during office hours will be granted access one time only. If a second occurrence happens, a fee of **$100.00** will be applied to the suite. For after hours access, please contact your landlord or the Corporation's Locksmiths: Breakaway Locksmiths at **647-278-0855** or Century Hardware at **416-789-7061**.

TSCC 2794 – PARCEL SYSTEM

Please only contact security team about your parcel if you receive a notification either from BuildingLink or Luxerone.

If you are not registered at LuxerOne please see link below:
LuxerOne.com/register

Please be advised of the following:

- Items exceeding a weight of 30 pounds (13.6 Kg) and/or size greater than 24" x 24" x 24"
- Perishable items are not accepted and will be denied and/or returned. Groceries, flowers, and food deliveries or any items requiring refrigeration are considered perishable and the concierge will not accept them.
- Any parcels over the weight and size restrictions will be returned and not accepted without further notice.
- For all residents using food and grocery delivery services please make the necessary arrangements to be able to accept the delivery without the use of concierge/security. Any food delivery that comes to the concierge desk will not be accepted.
- All parcels/envelopes not picked up within 72 hours will be returned to the sender.

Lastly, we would like to remind you that **only registered residents** who have filled out a parcel waver form will be able to pick up deliveries.

TSCC 2794 – HOW TO SET UP YOUR UTILITY ACCOUNTS

Utilities to contact prior to your move-in: Toronto Hydro.

Tel: 416-542-8000

Website: www.torontohydro.com

TSCC 2794 – Answers to Frequently Asked Questions

- Concierge staff **will not allow** visitors in the building without resident's permission. Visitors will wait in the lobby until the resident is contacted.
- It is the resident's responsibility to provide their visitors with their entry code/buzzer number. This includes deliveries (i.e. pizza).
- No flyers or door decoration are permitted in the corridors or hallways.
- No hammering or drilling is permitted after 5:00 p.m.
- No loud music after 11:00 p.m.
- Please respect your neighbors by limiting strong odours (i.e. cigarettes, food, and garbage) and by following proper ventilation protocols.
- **Nothing** is to be thrown from your balcony. Ever. This includes cigarette butts. This is a fire hazard and is considered a serious offence.
- Do not throw water off your balcony, let the water drain out naturally, as per the architectural design.
- Alcohol is not permitted in the hallways or common areas.
- No smoking in front of the building or in stairwells (as per the Ontario By-laws).
- Do not flush any foreign objects down the toilet (i.e. pet pee pads, hygiene products, wipes). If blockage occurs, it affects the units below you, and water damage may exceed $5000. Residents will be back charged for all damages.
- Do not place cardboard boxes or foam in the garbage chute. Do not leave garbage in the chute room, keep the chute area clean and clear. To dispose of large objects please contact the concierge. Each time the chute requires repair from blockage, the building spends approximately $1000. The resident causing the damage will be back- charged the amount.
- There is a two-animal maximum allowed per unit (one Cat and one Dog, two Dogs or two Cats). You must register the animals with Property Management.
- Owners must promptly clean up after their pets. There may be a $100.00 charge if dog excrement is found.
- Never place cardboard boxes on the balcony, to prevent fires from cigarette butts.
- The balcony is not a storage space; only patio furniture is allowed on your balcony.
- Damages or theft of any common element property will be back charged to the owner or resident. The cost of the replacement/repair is solely up to the Corporation's discretion. The owner/resident hereby accepts responsibility for the use of the common areas and living in the building in accordance with the regulations governing the usage as described in your Agreement.

TSCC 2794 – Residential Parking

All residential parking serving Lighthouse Tower is on-site and underground. The underground is 4 levels and parking for Lighthouse Tower is generally located on P4, P3 and P2. Vehicular parking is accessed via Richardson Street. The parking levels are served by two distinct passenger elevators. Residents will need to drive through parking spaces used by the East Tower in order to gain access to their parking stall.

Visitor parking is located at 130 Queens Quay East in the East Tower. There will be a charge for visitor parking.

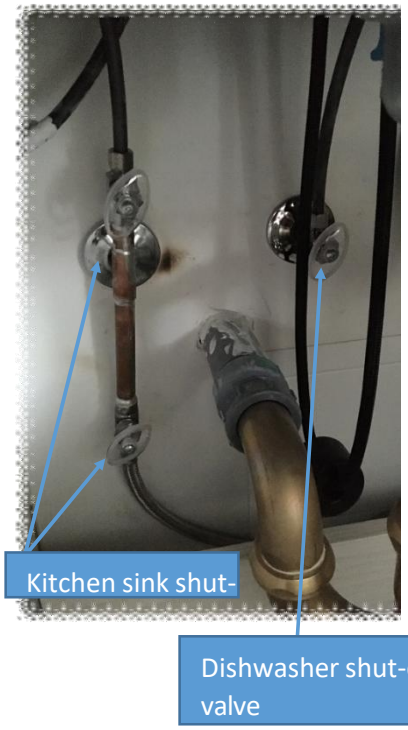
TSCC 2794 – Water Shut-Off Valve Locations

In case of a plumbing emergency, every member of your household should know the location of these shut-off valves. Your main shut-off valve is located in the bathroom. Additional water valves can be found under your kitchen sink, behind your toilet and in your laundry room (please see pictures below). To shut off the water, remove the access panel where you will see a hot and a cold-water valve – turn these off. To turn off, turn the valve perpendicular to the pipes. Water should stop flowing after one or two minutes.



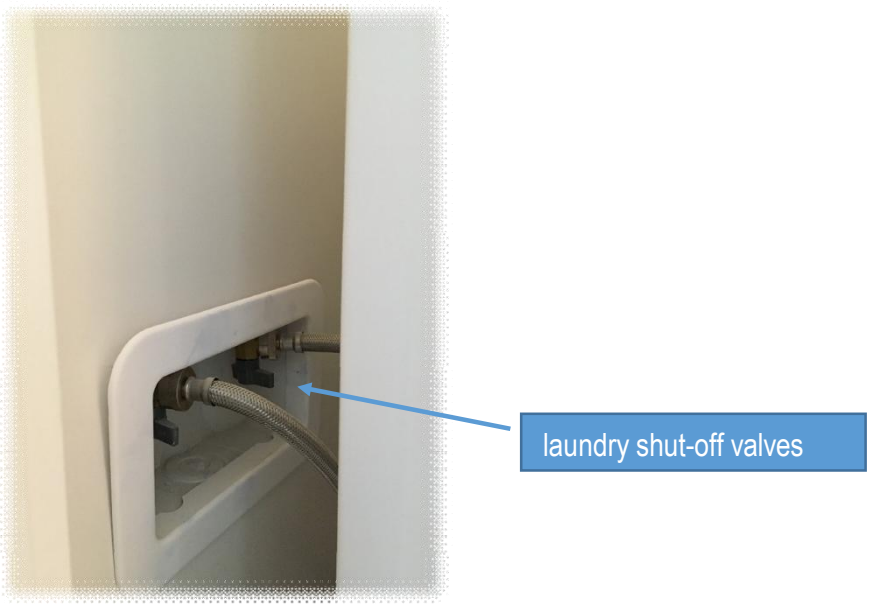
Example of a Main Water Valve located under a Bathroom Vanity

Your suite is also equipped with water shut-off valves in the following areas which can be used to stop water flow to a specific area in the case of a leak:





Laundry: Located beside the washer and dryer. The laundry water valve must be turned off after each use.



TSCC 2794 – Unit Paint Based Colour

The paint-based suite colour is “Decorative White”, Glidden Ultra low VOC latex paint, flat finish on the walls and Semigloss for the trim and doors. This product is part of a broad spectrum of superior decorative coatings available at our Dulux Paints stores across the country. Our in-store experts will be pleased to share with you the attributes of all our paints, from our “green” low-VOC products to our specialized Kitchen and Bath offerings, as well as provide tips on how to best achieve the look you seek. Check out dulux.ca and our “Colour Visualizer” to assist you in selecting a colour scheme when you decide to redecorate.

Please be advised, location may vary for certain layouts.

TSCC 2794 – Suggestion of Trades

Trades	Company
Suite Keys, mailbox key or cylinder replacement	Breakaway Locksmiths -647-278-0855 Century Hardware- 416-789-7061
Heat Pumps	Aircom-(905) 790-1309 -info@aircomhvac.ca GTS Services - info@gtsservices.ca - (647) 345–5325 Merrit building solutions - info@merrit.ca - (416) 238-5782
Plumbing	New Water Plumbing -905-731-2066 Interglobal - 416-242-2532 Jermark -416-789-7611 UPH- 416-630-6010
Pest Control	Rentokil - 416-226-5880
Flooring	Barwood -416-431-4800

TSCC 2794 – Booking Building Amenities

The Amenities Coordinator desk is located on 3rd floor and they are available from 10 am to 6 pm Monday to Friday and 11 am to 7 pm Saturday to Sunday. For inquires about bookings please see coordinator on the time mentioned above or please email them at atamenitieslighthousewest@gmail.com

Alternatively, you can contact them via phone at 437-427-9119

TSCC 2794 – Heat Pump Care

The Heat Pumps and filters are the responsibility of the owner to maintain. It is recommended to change filters every 3 months. if you are having issues with heating or cooling, please follow steps below:

Step 1: Check the thermostat to confirm it has been programmed properly. Please refer to the attached thermostat manual. (e.g., is the indicator showing “on” or “auto,” is the indoor temperature the same as “Indoor Temperature Set Point” or much lower, can you feel any circulation of air, etc.)

Step 2 – Check the heat pump filter. Filters should be replaced every 3 months. You can prolong the life of a filter by vacuuming the filter clean. New filters can be purchased from any home hardware store or online.

The MERV (Minimum Efficiency Reporting Values) rating for the filters should be between 6 - 8 as per the heating company (HTS) and not higher

Step 3 : Try resetting the heat pump from the breaker panel by following the below step

a) Please note. Shut off power to the heat pump unit from the breaker panel located inside your suite. Please wait for one minute.

b) Turn the power back on from the breaker panel. It will take time for the system to readjust (Approximately 5 minutes).

c) Give the heat pump unit time to readjust the airflow temperature within the unit.

If the reset does not work, please contact a licensed technician of your choice, if you require a suggestion of trades, please refer to page 08 of this Welcome package or contact management.

TSCC 2794 – REGISTRATION FORMS

The following sections are samples of forms. These forms are for your reference, and if you have any questions pertaining to this literature, please do not hesitate to contact Management.

Resident Information Sheet

This form advises Property Management of who is occupying the suite.

Form 5

An official form to advise the Condominium Corporation of the lease agreement between the homeowner and tenant.

Elevator Reservation Agreement

This form is to be filled out prior to the booking of a service elevator.

Pre-authorized Payment for Common Elements Assessment Fees

This form is to be filled by Owners only.

Lighthouse West Tower

RESIDENT INFORMATION FORM

The Resident information requested below is collected under the Condominium Act of Ontario. If any of this information changes, please advise Management as soon as possible. **Please PRINT clearly.**

Suite:

Move-in Date:	Date of Possession:

Owner Information (First name/Last name)	
Name:	Telephone:
Address:	City:
Postal Code:	Email:

Tenant Information: For security purposes please **list all persons** who will be **residing in the suite,** including all children. Tenants must present a copy of a fully executed lease. Note only persons listed on the lease will be registered.

A copy of the Lease Agreement is attached Yes____ No___

Residents (First name/Last name)	**Phone:**	**Email** (please print clearly)
1.		
2.		
3.		
4.		

Parking & Vehicle Information		
Parking Spot	**Vehicle Make/Model**	**Vehicle Plate**

Locker #	

Emergency Contact	Name:

Relationship	Telephone:
Email	
Pets	Do you own a Pet?
Type:	Name:
Weight	Color

Emergency Assistance:

Do you require assistance in case of an emergency (fire, flood, evacuation)?	Yes:	No:

Please list the particulars of any disabilities or medical problems concerning yourself or a family member that would necessitate assistance. (For example: difficulty walking or hearing impaired.) Your name will be added to our confidential emergency assistance list. Details:

Acknowledgement By Owner/Resident

- I/we confirm that the above information is accurate and that I/we will inform the Management Office of any changes in this information.
- I/we confirm that only the persons listed above will be residing in the suite.
- I/we am/are fully aware that my/our suite shall be occupied and used only as a private single family residence and for no other purposes, as stipulated in the registered Declaration of this Corporation.
- I/We confirm that we will not over occupy the suite as per the Building Code of Ontario. We also understand that only bedrooms may be used as sleeping areas.
- As required by The Condominium Act of Ontario, all Residents and Visitors must comply with the Act, and the Declaration, Bylaws, Rules and policies of the Corporation and therefore I am aware that I am responsible for and will accompany my guests at all times.
- I/we acknowledge and affirm that I/we, the members of my/our household and my/our Visitors from time to time will, in using the unit identified above and any of the common elements, **will comply with the Condominium Act of Ontario, the Declaration, Bylaws, Rules and policies of the Corporation.**
- I /We have received from my landlord/agent/lawyer and will follow all the documentation mentioned above for The Lighthouse
- **I/We understand and confirm that both tenants and owners are required to obtain their own insurance coverage and that the Corporations' insurance does not cover tenants and owners insurance.**

Signature:	
Date:	
Witness:	
Office Use: Entered into database:	

Lighthouse West

Resident's Waiver to Accept Packages

Yes, I would like the Concierge to accept packages in my

Packages will be accepted for REGISTERED residents only. We cannot accept packages for friends or family members.

Please note we can accept:

- small deliveries and packages from couriers
- non-perishables, pharmacy deliveries, flower arrangements

and cannot accept:

- Keys, COD's , food deliveries, registered mail or large deliveries.

Residents Name:	
Residents Name:	
Suite:	
Telephone:	
Email:	

STATEMENT BY RESIDENT

"I/We, the undersigned resident(s) of Suite_____, Lighthouse West, Toronto Ontario, hereby authorize the Concierge/Security and or Management Staff to accept packages/envelopes on my/our behalf.

I/We will not hold, ICC Property Management Ltd., or their employees, the Corporation or their employees, or any contracted staff member on duty, for any missing or damaged packages/envelopes, left in the common areas, or for late deliveries.

I/We will not hold, ICC Property Management Ltd., or their employees, the Corporation or their employees, or any contracted staff member on duty, <u>for the care of any fresh arrangement or perishable item.</u>

Resident Signature	
Resident Signature	
Date	

Lighthouse West Tower

SUMMARY OF LEASE OR RENEWAL (Form 5)

(clause 83 (1) (b) of the *Condominium Act, 1998*)

TO BE COMPLETED – IN FULL – BY THE UNIT OWNER

TO: Toronto Standard Condominium Corporation No 2794

1. **This is to notify you that** a written or oral lease, sublease, assignment of lease *(strike out whichever is not applicable)* OR a renewal of a written or oral lease, sublease, assignment of lease *(strike out whichever is not applicable)* has been entered into for:
   Unit # _____, Parking Space # _____, Storage Unit # _____*(strike out any not applicable)*
   on the following terms:

   Name of Lessee: _____

   Telephone Numbers: (res) _____ (work) _____ (mobile) _____

   Email Address: _____

   Commencement Date: _____ Termination Date: _____

   Option to Renew: _____ *(set out details)*

   Rental payments: _____*(set out amount and when due)*

2. **I (We) have provided** the lessee/sublessee *(strike out whichever is not applicable)* with a copy of the Rules, By-Laws and Declaration of the condominium corporation.
3. **I (We) acknowledge that**, as required by subsection 83 (2) of the *Condominium Act, 1998,* I (we) will advise you in writing if the lease, sublease, assignment of lease *(strike out whichever is not applicable)* is terminated.

Dated this _____day of _____, 20____.

_____
(Signature of owner(s)

_____
(Print name of owner(s))

_____
(Street Address)

_____
(City, Province, Postal Code)

_____
(Telephone numbers)

_____
(Email Address)

Lighthouse Tower

ELEVATOR RESERVATION AGREEMENT

This agreement along with the required payments must be received in full in order to confirm a booking.

Suite #	I am the owner:_____I am the tenant: _____
Name	
Telephone	
Email address:	
Date Required	
Service Elevator	Elevator C*__ Parking Elevator 5** __
Time Required	
Purpose	Move in Move out Delivery Renovations Bulk Item Removal
Booking hours	**Monday** 9:00 am – 9:00pm, **Tuesday** 1:00pm to 9:00pm, **Wednesday** 9:00 am to 9:00 pm, **Thursday** 1:00 pm to 9:00 pm, **Friday** 9:00 am to 9:00pm, **Saturday** 8:00 am to 9:00 pm **Sundays and Statutory Holidays**- Bookings are not permitted **– 2hrs slots maximum**

Delivery/Movers Company Contact Information:

Company	
Telephone	
Personnel	
License Plate	

I/we the resident of Suite _____, understand and agree to the following conditions:

1. I agree that I am responsible for any damages caused by my movers or any other persons involved in the move.
2. The damage deposit will be refunded upon completion of the move and after an inspection of the common area, not having caused any damage to the common elements and upon surrender to the Superintendent all common element keys and garage access devices in my possession.
3. I shall notify the Superintendent/Security and request an inspection of the elevator immediately prior to using the elevator. Upon completion of the move or delivery, I shall forthwith request a re-inspection of the elevator and affected common elements.
4. I shall provide a security deposit amount of **$500.00** if I move in, deliveries or bulk item removal . I shall provide a certified cheque or money order amount of **$500.00** if I move out or renovate my suite. (Payable to **TSCC 2794**)
5. I shall be liable for the full cost of all repairs to any damage, which may occur as a result of the use of the elevator by my agents or me. I shall accept the cost of repairs as assessed by the Manager and acknowledge that all or part of the security deposit shall be withheld and applied towards the cost of repairs.
6. I shall only use the elevator during the term of the reservation.

Ontario

7. I shall take reasonable precautions to prevent unauthorized entry into the building during the term of the reservation.
8. I shall not obstruct corridors and elevator lobbies prior to, during or after the term of the reservation
9. I agree that the PROTECTIVE PADS must be in place prior, during and after and/or until the completion of the final inspection.

I hereby acknowledge that I have read this Agreement and I agree to abide by the conditions indicated above.

DATED _____ Applicant's Signature _____

* Elevator C services suite from ground floor to 45th floor

** Parking Elevator 5 services lockers and parking spots from Parking level 4 to ground

FOR OFFICE USE

PRE & POST INSPECTION:

Areas Inspected:	BEFORE	AFTER
Loading Dock Area	_____	_____
Garbage Left in Bulk Item area	_____	_____
Ground Level Lobby and Doors	_____	_____
Elevator Doors/Frame	_____	_____
Elevator Cab/Pads	_____	_____
Corridor Floor/Walls	_____	_____
All Fixtures	_____	_____
Suite Door	_____	_____

Damages noted: if any

_____

_____

_____

Resident acknowledgement of damage listed above: _____

Security/Damage deposit returned on: _____

Residents' acknowledgement – Deposit received: _____

Ministry of Government
and Consumer Services

Agreement to Receive Notices Electronically

Agreement by owner or mortgagee to receive notices from the corporation by electronic delivery

Owner's or mortgagee's name

_____

Condominium corporation's name

_____

In order for your condominium corporation to enter into this agreement, the board of your corporation must have passed a resolution to determine the methods of electronic communication that it will use for serving notices on owners or mortgagees. Before filling out this form, you should consider contacting the corporation to find out what those methods are.

Method the corporation will use to deliver notices to me:

☐ Email

My email address is_____ _____

☐ Facsmile

My fax number is_____

☐ Other_____

☐ I agree that I am sufficiently served, as described in section 54 of the Condominium Act, 1998, if the corporation uses the method of delivering notices identified in this agreement.

_____ _____

Signature of owner or mortgagee Date(yyyy/mm/dd)

Signature of owner or mortgagee Date(yyyy/mm/dd)

Signature of owner or mortgagee Date(yyyy/mm/dd)

Please affix the corporate seal or add statement below that the person signing has the authority to bind the corporation