

Permission To Enter Suite Authorization

Tower: West (A) East (B) Suite No.	.: Strata Lot:
Today's Date:	
Formal Move in Date:	
As the owner / 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: \Box Owner Occupied \Box Tenant Occupied \Box Not Occupied	

If no one is at home when work is to be done, please check one below:	
\Box Please call before entering suite [*] \Box 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.W1@concordpacific.com</u>

Fax: (604) 899-9183 Mail To: ATTN: CONCORD W1 LIMITED PARTNERSHIP 9th Floor – 1095 West Pender, Vancouver, B.C. V6E 2M6