

**1111 MIDLAND AVENUE TENANTS CORP.  
1111 Midland Avenue  
Bronxville, New York 10708**

**MOVE-IN AND MOVE-OUT RULES AND PROCEDURES**

Please advise that on March 18, 1997, the Board of Directors adopted the following rules and procedures governing the moving in and out of the building. These rules have been adopted to reduce inconvenience to the residents and to prevent damage to building and equipment while someone moves in or out of the building.

You must give the Managing Agent, Stillman Management, Inc., a minimum of 5 days prior notice **in writing** of your intention to move in or out of the building. **YOU MUST SUPPLY THE FOLLOWING INFORMATION:**

1. DATE AND EXPECTED TIME OF MOVE.
2. NAME, ADDRESS, & TELEPHONE NUMBER OF THE MOVING COMPANY
3. A DAMAGE DEPOSIT IN THE FORM OF A CERTIFIED CHECK OR MONEY ORDER IN THE AMOUNT OF \$1000.00, PAYABLE TO 1111 MIDLAND AVENUE TENANTS CORP. THIS DEPOSIT WILL BE REFUNDED AFTER THE AGENT OR SUPERINTENDENT HAS INSPECTED THE UNIT AND COMMON AREAS. PLEASE INFORM OUR OFFICE IF YOU BELIEVE THAT YOU HAVE A MOVING DEPOSIT ON FILE WITH US SO THAT WE MAY CHECK OUR RECORDS ACCORDINGLY.
4. CERTIFICATE OF LIABILITY INSURANCE & WORKMAN'S COMPENSATION LISTING 1111 MIDLAND AVENUE TENANTS AVENUE CORPORATION AND STILLMAN MANAGEMENT REALTY CORP. AS ADDITIONALLY INSURED MUST BE PROVIDED BY THE MOVING COMPANY.

Moving is only permitted between the hours of 8:30 am until 4:30 pm. Mondays through Saturdays. No move-ins or move-outs will be permitted on Sundays. Residents who are moving in or out should advise their moving company that the move must be completed by 4:30 pm, to enable the building's staff time to cleanup.

All residents moving in or out must use an elevator with proper wall covering supplied by the building's staff. Movers and residents must make sure not to leave any items in any hallway or lobby for any length of time.

Prior to the move in or move out date, the moving company must provide a Certificate of Liability insurance as well as proof of Workman's Compensation Insurance, naming both 1111 Midland Avenue Tenants Corporation and Stillman Management, Inc. as additional insured.

Please note that failure to comply with these rules and procedures may result in the forfeiture of the move-in/move-out deposit.

**1111 MIDLAND AVENUE TENANTS CORP.  
MOVE-IN/MOVE-OUT REQUEST AND AUTHORIZATION  
SUBMITTED BY UNIT OWNER**

**Date:** \_\_\_\_\_

**From:** \_\_\_\_\_ Apt. \_\_\_\_\_ Phone # \_\_\_\_\_

Email Address \_\_\_\_\_ Cell# \_\_\_\_\_

Moving date requested: \_\_\_\_\_ Alternate Date \_\_\_\_\_ Start Time \_\_\_\_\_

**Before a move-in date can be scheduled you must submit the following to: The Superintendent**

1. A refundable damage deposit of \$1000.
2. A completed move-in Request and Authorization form.
3. A Certificate of Insurance from your mover naming the unit owner as named insured and 1111 Midland Avenue Tenants Corp. and Stillman Management Realty Corp., as additional insured.
4. An executed Indemnification Agreement (copy attached).

**INCOMPLETE APPLICATIONS ( i.e., WITHOUT ALL ATTACHMENTS)  
WILL BE RETURNED.**

I (or my tenant) has received the section of 1111 Midland Avenue Tenants Corp. and Regulations on "Moving In and Out" (attached) and agrees to comply with them.

\_\_\_\_\_  
Signature of Unit Owner



**The above move request application from has been approved.**

\_\_\_\_\_  
Manager

**Deposits will not be refunded until the Post Move Inspection.**



Date of Move \_\_\_\_\_

Time Move-In Began \_\_\_\_\_ Time Move-In Completed: \_\_\_\_\_

	<u>Pre-Inspection</u>	<u>Post Inspection</u>
Inspection Hallway Walls:	_____	_____
Service Entrance	_____	_____
Elevators:	_____	_____
Unit Door:	_____	_____
Main Hallway	_____	_____
Apt. Hallway	_____	_____



Please return move-in deposit of: \_\_\_\_\_

Remarks/Deductions \_\_\_\_\_

\_\_\_\_\_  
Authorizing Manager Date \_\_\_\_\_

**BOOKKEEPING DEPARTMENT**  
Stillman Management Realty Corp.  
440 Mamaroneck Ave Suite S512  
Harrison, NY 10528