

# TARPON LANDINGS CONDOMINIUM ASSOCIATION

## ELEVATOR POLICIES AND PROCEDURES

(To be completed by Unit Owner or Unit Owner's Agent)

Unit Owner's Name \_\_\_\_\_ Name of Renter \_\_\_\_\_

Requested Date(s): \_\_\_\_\_ Garage P1 or P2 \_\_\_\_\_ Garage # \_\_\_\_\_

Address: \_\_\_\_\_ Silver King Boulevard Cape Coral, Florida 33914 Unit # \_\_\_\_\_

Unit Owner's Cell # \_\_\_\_\_ Renter's Cell # \_\_\_\_\_

E-mail Address of Unit Owner/Renter \_\_\_\_\_

Request for \_\_\_\_\_ Use and Inspection @ \$50 fee per day (Monday through Friday) \*Non-refundable.

### CONTRACTOR / VENDOR / MOVER

Insurance Certificate per Tarpon Landings Criteria Attached YES \_\_\_\_\_ No \_\_\_\_\_

Company Name \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone \_\_\_\_\_

Scope of Work: \_\_\_\_\_

- ***Elevator reservation hours are Monday through Friday from 8:00 a.m. to 4:30 p.m. Contractor/Vendor MUST be off the property by 5:00 p.m. Weekend reservations for Contractor/Vendor are not allowed.***
- ***Reservations must be made with the management office at least 48 hours in advance. Elevator usage and protection/padding must be requested at least 48 hours in advance of any job using the Elevator Policy and Procedures form with fees paid at time of application.***
- ***No overnight storage is permitted anywhere on property without advanced written permission.***
- ***Contractor/Vendor must remove all cartons, crates and packing material from the Property.***
- ***Vendors moving (delivery/removal) furniture and non-contractor installed appliances may use P2 level.***

### **Dimensions**

- ***It is the responsibility of the unit owner and Contractor/Vendor to understand the limits of elevator dimensions and roof access door dimensions before undertaking any project that might be affected by these dimensions:***

*Inside Dimensions of Elevator Cab Maximum:*

***Cab Width: 75" / Cab Depth: 52" / Cab Height: 100" / Doors: 84" high, 41" wide/  
Weight Capacity 2500lbs.***

- ***Door Dimensions: Roof access and P1 Entrance door clearances on each building limit the size of air conditioning equipment and other items being transferred to the roof to a maximum width of 32 inches.***
- ***Designated Elevator-Contractors and Vendors are to use the designated padded service elevator only. Contractors and Vendors using elevators must be in compliance at all times with the elevator usage and protection policy. Contractors and Vendors in violation of the elevator policy will be subject to an immediate termination of all elevator usage rights. For repeat offenders, elevator rights could be suspended for five days, or more.***

***The Association Board of Directors and/or Management may impose additional requirements or instructions from time to time to enhance the safe operations of the building and the safety and convenience of Owners and Residents.***

### **ACKNOWLEDGEMENT**

I have read and understand the above Elevator Policies and Procedures.

I understand elevator reservations must coincide with an available date on the **Association's** reservation calendar on a first come, first serve basis, and that elevator will be inspected for damage before and after use.

I/We agree that all work performed or delivered to improve and /or furnish my Unit by the above party is to be performed on my behalf, by such party as my agent. I assume full responsibility for damages caused by such agent, whether to any person or property and hereby agree to indemnify and hold harmless Tarpon Landings Condominium Association, Inc. (**the "Association"**) for any damages claimed by any party. If any damage occurs, the **Association**, its management, or agents, in their sole discretion will determine and charge my assessment account for the cost of repair or replacement of **Association** property.

I/We hereby agree to indemnify and hold harmless Tarpon Landings Condominium Association (**"Association"**), including its employees or agents, from any claims against the Association arising from any situation in connection with my elevator reservation request.

Unit Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

Renter of Unit Signature \_\_\_\_\_ Date \_\_\_\_\_

Renter Printed Name \_\_\_\_\_

Agent of Unit Signature \_\_\_\_\_ Date \_\_\_\_\_

Agent Printed Name \_\_\_\_\_