



# Island Condo Management Corp.

*Established 1981*

**The Island Condo Building  
1610 Richmond Road  
Staten Island, New York 10304**

**718-981-2500**

- *Accounting Services*
- *Consulting*
- *Staffing*

## **BAYVIEW TOWER CONDOS ~ MOVE-INS/MOVE-OUTS**

**MOVING HOURS:** Monday through Friday from 9AM to 5PM, except holidays.

**MOVING COMPANIES:** Must supply management with current Certificate of Insurance.

**MOVING DEPOSIT:** A Certified Check for \$500 security deposit made out to Bayview Tower Condominium and sent to Island Condo as a deposit toward possible damage to a common element during a move. Providing there is no damage or overtime, the deposit (or portion if there is damage) will be refunded within 30 days of move.

**MOVING DATE:**

Must be scheduled by Managing Agent upon approval of move in requirements  
Superintendent will supervise all moves and ensure the elevators are padded for the day of the move  
Superintendent is entitled to overtime should the move extend beyond his regular business hours (Overtime to be paid by unit owner) Should the move extend past 5 p.m. the unit owner will be subject to a charge of \$50.00 per hour (or part thereof), which will be deducted from their deposit.

**OWNER/TENANT FILL IN BELOW**

Unit #: \_\_\_\_\_ Date of Move: \_\_\_\_\_ Owner Name: \_\_\_\_\_

Name & # of Person Moving: \_\_\_\_\_

New Mailing Address: \_\_\_\_\_

Requested Move Date/s and Time/s: \_\_\_\_\_

Name & # of Moving Company: \_\_\_\_\_

Signature Of Responsible Party Agreeing to Terms Above: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Moving Company Insurance On File:  Yes  No ~ Security Deposit Rec'd and Amount: \_\_\_\_\_

Pre-Inspection Performed By: \_\_\_\_\_ Post-Inspection Performed By: \_\_\_\_\_ Mgr Initials: \_\_\_\_\_

Move Completed:  Yes  No Moving Damage: \_\_\_\_\_

Security Deposit Released:  Yes  No Date and Check #: \_\_\_\_\_

Notes: \_\_\_\_\_