

PERIODIC INFORMATION CERTIFICATE

Information for owners about the corporation

2019 August 30

Ottawa Carleton Standard Condominium Corporation No. 975 Legendary Lofts

1. GENERAL INFORMATION ABOUT THE CORPORATION

Property Manager: Dan Fried - dfried@cimanagement.ca (interim)
Mailing Address/
Address for service: Capital Integral Property Management
205-1600 Laperriere Avenue
Ottawa, ON K1Z 8P5
ATTN: OCSCC 975

The corporation has an email address or other method of electronic communication for receiving requests for records, in addition to the addresses identified above:
service975@cimanagement.ca

The method of electronic communication is email for required documentation so long as written approval is obtained by the Management company from the intended recipient. If no permission is granted the other methods of communication as per the Act must be used.

Management is updating documents to the Owner Portal for the corporation at www.cimanagement.ca with relevant documentation. Therefore a Request for Records is not necessary for most core documentation.

Number of leased units

The corporation's understanding is 57 unit(s) in the condominium are owned by non-resident owners as of the date of this certificate, but the corporation has not received notice under s. 83 of the *Condominium Act, 1998* respecting all of those leased units during the current fiscal year.

2. DIRECTORS AND OFFICERS OF THE CORPORATION

Irene Shumada, Director, President, OOP, 2019 March 06 - 2021

Vijay Tejuja, Director, Treasurer, 2018 February 28 - 2020

Oliver Ho, Director, 2018 February 28 - 2020

Not applicable for any:

- ☐ a. is a party to a legal action to which the corporation is a party
- ☐ b. was a party to a legal action that has resulted in an outstanding judgment against the corporation or the director

- ☐ c. has contributions to the common expenses that are in arrears for 60 days or more
- ☐ d. has not completed the prescribed training within the prescribed time under clause 29 (2) (e) of the Act

Address for service: Capital Integral Property Management
205-1600 Laperriere Avenue
Ottawa, ON K1Z 8P5
ATTN: Board of OCSCC 975

Email Address: service975@cimanagement.ca

3. INSURANCE INFORMATION ABOUT THE CORPORATION

The corporation has obtained and maintained all of the insurance required by the *Condominium Act, 1998* or that is otherwise legally required, at all times during the current fiscal year. ☒ Yes ☐ No

If an owner causes damage to the condo property, the condo corporation may be required to add the cost of repairing the damage or the deductible limit of the corporation's required insurance policy, whichever is less, to the owner's common expenses, or the corporation may seek to recover the amount from the owner in another manner. This could be affected by a by-law the corporation may have passed under clause 56(1)(i).

The corporation's deductibles for each required insurance policy are:

Policy	Deductible Amount	Maximum amount that could be added to an owner's common expenses under s. 105 (2) of the <i>Condominium Act, 1998</i> or as a result of a by-law passed under s. 56 (1) (i) of the Act.
Intact Insurance Policy Binder #3540 Expiring 2019 October 08	See attached certificate	See attached certificate

The corporation has obtained and maintained the insurance policy described in section 39 of the *Condominium Act, 1998*

☒ Yes ☐ No

The corporation has obtained and maintained the insurance policy described in section 99 of the *Condominium Act, 1998*

☒ Yes ☐ No

The corporation has obtained and maintained the insurance policy described in section 102 of the *Condominium Act, 1998*

☒ Yes ☐ No

The corporation has or had a legal obligation to maintain insurance, aside from the insurance described in section 39, 99, and 102, at any time during the fiscal year

☒ No ☐ Yes

Information about the "standard unit"

☐ The standard unit is described in a by-law made under s. 56(1)(h) of the *Condominium Act, 1998*.

☒ The standard unit is not described in a by-law made under s. 56(1)(h) of the *Condominium Act, 1998*.

☒ The corporation has a schedule, referred to in s. 43(5)(h) of the *Condominium Act, 1998*, setting out what constitutes a standard unit.

☒ A certificate or memorandum of insurance for each of the corporation's current insurance policies is enclosed with this information certificate.

4. FINANCIAL INFORMATION ABOUT THE CORPORATION

Budget

The budget of the corporation for the current fiscal year is accurate and may result in:

☐ a surplus of:

☐ a deficit of:

☒ neither a surplus nor a deficit

Reserve Fund

As of the last day of the quarter to which the information certificate relates: the balance in the reserve fund was \$453,849 (unaudited) as of 2019 June 30

The balance of the reserve fund at the beginning of the current fiscal year was \$315,625 (audited) as of 2018 October 01.

In accordance with the budget of the corporation for the current fiscal year, the annual contribution to be made to the reserve fund in the current fiscal year is: \$177,480

The anticipated expenditures to be made from the reserve fund in the current fiscal year, in accordance with the corporation's budget or Reserve Fund Study, amount to:

Description of expenditure	Amount
Expenditures Anticipated in the Reserve Fund Study: Note: Figures are in 2016 dollars; not adjusted for inflation.	
Workout Area - local repair/replace of finishes	\$2,000
Workout Area - exercise equipment allowance	\$3,000
Soft Landscaping	\$5,000
Actual Expenditures:	
Fire Repairs required following the semi annual pump and sprinkler tests.	\$1,423.80
Fridge replacement for party room due to compressor failure.	\$981.97

Garage door repairs

\$815.30

The current plans, if any, to increase the reserve fund under a plan proposed by the board under subsection 94(8) of the *Condominium Act, 1998* for future funding of the reserve fund are: 2% increase in contributions per year, until the next reserve fund plan is completed

The corporation has an outstanding claim for payment out of the guarantee fund under the Ontario New Home Warranties Plan Act:

☐ Yes ☒ No

5. LEGAL ACTIONS RELATING TO THE CORPORATION

The corporation is currently a party to a legal action:

☐ Yes ☒ No

6. OUTSTANDING JUDGEMENTS RELATING TO THE CORPORATION

The corporation currently has outstanding judgments against it:

☐ Yes ☒ No

7. DISCLOSURE INFORMATION FROM DIRECTORS OF THE CORPORATION

☐ Copies of statements and information provided to the board during the current fiscal year under section 11.10 of O. Reg. 48/01 under the *Condominium Act, 1998* are enclosed with this information certificate.

☒ Not applicable

8. COMPLIANCE INFORMATION ABOUT THE CORPORATION

The corporation has complied with all returns obligations, if any, under Part II.1 of the *Condominium Act, 1998* during the current fiscal year:

☒ Yes ☐ No

The corporation complied with its assessment fee obligations, if any, under s. 1.30(6) of the *Condominium Act, 1998* during the current fiscal year:

☒ Yes ☐ No

A copy of any compliance order made by a Registrar directing the corporation, or a director or officer of the corporation, to comply with subsection 1.30(6), any provision of Part II.1 or subsection 132(9) of the *Condominium Act, 1998*, is enclosed with this certificate, unless the corporation, director or officer of the corporation, has taken the required steps for a hearing by the License Appeal Tribunal in respect of the compliance order, under section 134.1 of the *Condominium Act, 1998*.

☐ Yes ☒ Not applicable

9. OTHER INFORMATION ABOUT THE CORPORATION THAT IS REQUIRED BY A CORPORATION'S BY-LAWS

- ☒ Not applicable
☐ A by-law of the corporation requires additional information to be included with this certificate. The additional information required by the by-law is included below, or is enclosed with this certificate as a separate document.

ATTACHMENTS

Insurance Certificate
Budget
Disclosure Information from Directors

CERTIFICATE OF PROPERTY INSURANCE



This certificate is issued as a matter of information only and confers no rights upon the certificate holder and imposes no liability on the insurer. This certificate does not amend or alter the coverage afforded by the policies below.

More than Insurance - relationships matter.

CERTIFICATE HOLDER – NAME AND MAILING ADDRESS				INSURED'S FULL NAME AND MAILING ADDRESS				
Capital Integral Property Management				Ottawa Carleton Standard Condominium Corporation No. 975				
904 Lady Ellen Place				904 Lady Ellen Place				
Ottawa, ON				Ottawa, ON				
K1Z 5L5				K1Z 5L5				
LOCATION OF PREMISES / DESCRIPTION OF PROPERTY TO WHICH THIS CERTIFICATE APPLIES								
116 Unit Condominium Corporation								
Location: 555 Anand Private, Gloucester, ON K1V 2R7								
COVERAGES								
This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or pertain. The insurance afforded by the policies described herein is subject to all terms, exclusions and conditions of such policies.								
TYPE OF INSURANCE	INSURANCE COMPANY & POLICY NUMBER	EFFECTIVE DATE MM/DD/YY	EXPIRY DATE MM/DD/YY	LIMITS OF INSURANCE Canadian \$ unless indicated otherwise				
				COVERAGE	DEDUCTIBLE	AMOUNT OF INSURANCE		
<input checked="" type="checkbox"/> Property <input checked="" type="checkbox"/> Broad Form <input type="checkbox"/> Named Perils <input checked="" type="checkbox"/> Co-Insurance % <u>90</u> <input type="checkbox"/> Stated Amount <input type="checkbox"/> Margin Clause % _____	Intact Insurance BINDER 3540	10/08/2018	10/08/2019	<input type="checkbox"/> P.O.E.D.	<input type="checkbox"/> RC	<input type="checkbox"/> ACV		
				<input checked="" type="checkbox"/> Building	<input checked="" type="checkbox"/> RC	<input type="checkbox"/> ACV	5,000	26,780,000
				<input type="checkbox"/> Equipment	<input type="checkbox"/> RC	<input type="checkbox"/> ACV		
				<input type="checkbox"/> Stock	<input type="checkbox"/> RC	<input type="checkbox"/> ACV		
				<input type="checkbox"/> C.O.E.D.	<input type="checkbox"/> RC	<input type="checkbox"/> ACV		
				<input type="checkbox"/> Business Income				
				<input type="checkbox"/> Extra Expense				
				<input type="checkbox"/> Rental Income				
				<input checked="" type="checkbox"/> Earthquake			3% / 100,000	
				<input checked="" type="checkbox"/> Flood			25,000	
<input checked="" type="checkbox"/> Sewer Back-up			5,000					
<input type="checkbox"/> Inland Marine <input type="checkbox"/> Named Perils <input type="checkbox"/> Broad Form <input type="checkbox"/> Actual Cash Value <input type="checkbox"/> Replacement Cost				<input type="checkbox"/> Contractor's Equipment				
				<input type="checkbox"/> Cargo _____				
				<input checked="" type="checkbox"/> Water Damage Deductible	15,000			
				<input type="checkbox"/>				
<input checked="" type="checkbox"/> Boiler & Machinery/ Equipment Breakdown	Intact - BINDER 3540	10/08/2018	10/08/2019		5,000	26,780,000		
<input type="checkbox"/>								
ADDITIONAL INFORMATION								
CANCELLATION								
Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail <u>30</u> days written notice to the certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.								
BROKERAGE FULL NAME & MAILING ADDRESS				INTERESTED PARTY NAME & MAILING ADDRESS				
Craig McDonald Reddon Insurance Brokers Ltd.								
467 10th Street, Suite 200								
Hanover, ON								
N4N 1R3				NATURE OF INTEREST:				
CERTIFICATE AUTHORIZATION								
SIGNATURE OF AUTHORIZED REPRESENTATIVE 	PRINT NAME:	Dave Eccles, CAIB			DATE (MM/DD/YY) 10/09/2018			
	EMAIL ADDRESS:	deccles@cmrinsurance.com						
	PHONE:	519-364-3540						
	FAX:	519-364-7209						

CERTIFICATE OF INSURANCE



This certificate is issued as a matter of information only and confers no rights upon the certificate holder and imposes no liability on the insurer. This certificate does not amend, extend or alter the coverage afforded by the policies below.

More than Insurance - *relationships matter.*

CERTIFICATE HOLDER – NAME AND MAILING ADDRESS		INSURED'S FULL NAME AND MAILING ADDRESS			
Capital Integral Property Management		Ottawa Carleton Standard Condominium Corporation No. 975			
904 Lady Ellen Place		904 Lady Ellen Place			
Ottawa, ON		Ottawa, ON			
K1Z 5L5		K1Z 5L5			
DESCRIPTION OF OPERATIONS/LOCATIONS/AUTOMOBILES/SPECIAL ITEMS TO WHICH THIS CERTIFICATE APPLIES					
116 Unit Condominium Corporation					
Location: 555 Anand Private, Gloucester, ON K1V 2R7					
COVERAGES					
This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or pertain. The insurance afforded by the policies described herein is subject to all terms, exclusions and conditions of such policies.					
LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS					
TYPE OF INSURANCE	INSURANCE COMPANY & POLICY NUMBER	EFFECTIVE DATE MM/DD/YY	EXPIRY DATE MM/DD/YY	LIMITS OF LIABILITY Canadian \$ unless indicated otherwise	
COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> Claims Made <input checked="" type="checkbox"/> Occurrence <input checked="" type="checkbox"/> Products and/or Completed Operations <input type="checkbox"/> Employer's Liability <input checked="" type="checkbox"/> Cross Liability <input checked="" type="checkbox"/> Tenants Legal Liability <input type="checkbox"/>	Intact Insurance BINDER 3540	10/08/2018	10/08/2019	Each Occurrence	5,000,000
				General Aggregate	5,000,000
				Products & Completed Operations	5,000,000
				Personal Injury	5,000,000
				Tenants Legal Liability	1,000,000
NON-OWNED AUTO LIABILITY <input checked="" type="checkbox"/> Non-Owned Automobiles <input type="checkbox"/> Damage to Hired Autos	Intact Insurance BINDER 3540	10/08/2018	10/08/2019	Non-Owned Auto	5,000,000
				Hired Auto	
AUTOMOBILE LIABILITY <input type="checkbox"/> Described Automobiles <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Leased Automobiles * <input type="checkbox"/> *All automobiles leased in excess of 30 days where the insured is required to provide insurance.				Bodily Injury & Property Damage Combined	
				Bodily Injury (Per Person)	
				Bodily Injury (Per Accident)	
				Property Damage	
EXCESS LIABILITY <input type="checkbox"/> Umbrella or Excess Form <input type="checkbox"/> Other _____				Each Occurrence	
				Aggregate	
OTHER LIABILITY (SPECIFY) <input checked="" type="checkbox"/> Condominium Directors & Officers <input type="checkbox"/> <input type="checkbox"/>	Intact Insurance BINDER 3540	10/08/2018	10/08/2019		2,000,000
CANCELLATION Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail <u>30</u> days written notice to the certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.					
BROKER'S FULL NAME & MAILING ADDRESS			ADDITIONAL INSURED NAME & MAILING ADDRESS (Commercial General Liability – but only with respect to the operations of the Named Insured)		
Craig McDonald Reddon Insurance Brokers Ltd.					
467 10th Street, Suite 200					
Hanover, ON N4N 1R3					
CERTIFICATE AUTHORIZATION					
SIGNATURE OF AUTHORIZED REPRESENTATIVE 	PRINT NAME:	Dave Eccles, CAIB		DATE (MM/DD/YY) 10/05/2018	
	EMAIL ADDRESS:	deccles@cmrinsurance.com			
	PHONE:	519-364-3540			
	FAX:	519-364-7209			

OCCSC No. 975 Budget	2017/18 Budget	2017/18 Actual @June 30/18	2017/18 Projected	2018/19 Budget	Notes
Summary - Total		(9 months)			
Revenue	\$599,398	\$450,605	\$600,807	\$641,384	
Expenses	\$599,398	\$462,831	\$627,137	\$641,384	
Surplus/Deficit	\$0	-\$12,226	-\$26,330	\$0	
Category					
Utilities	\$178,615	\$146,148	\$194,864	\$207,881	
Contracts	\$95,448	\$78,635	\$101,152	\$99,716	
Maintenance	\$59,698	\$34,461	\$60,790	\$56,939	
Admin	\$89,136	\$73,087	\$96,330	\$94,369	
Contingency	\$2,500	\$0	\$0	\$5,000	
Reserve	\$174,000	\$130,500	\$174,000	\$177,480	
Revenue					
Common Element Fees	\$599,398	\$449,449	\$599,266	\$641,384	7.00%
Miscellaneous Revenue		\$1,156	\$1,541	\$0	0
TOTAL Revenue	\$599,398	\$450,605	\$600,807	\$641,384	% Increase of condo fees
Expenses					
<u>Utilities</u>					
Gas	\$40,448	\$44,324	\$59,099	\$62,645	1
Hydro	\$81,585	\$62,280	\$83,040	\$88,112	1
Water	\$48,782	\$34,535	\$46,047	\$50,246	1
Telecom	\$7,800	\$5,009	\$6,679	\$6,879	2
Subtotal Utilities	\$178,615	\$146,148	\$194,864	\$207,881	
<u>Contracts Expense</u>					
Cleaning	\$39,556	\$27,813	\$37,084	\$35,191	3
Superintendent	\$0	\$0	\$0	\$0	
Waste Removal	\$7,438	\$5,132	\$6,843	\$6,980	
Garage Door Contract	\$1,400	\$922	\$1,229	\$1,254	4
Parking monitor and security	\$4,080	\$2,951	\$3,935	\$4,197	5
Fire Safety	\$4,322	\$5,215	\$5,644	\$5,814	
HVAC Maintenance Contract	\$2,171	\$548	\$3,223	\$4,735	6
Elevator Maintenance Contract	\$9,370	\$11,001	\$14,668	\$12,448	
Fitness Centre Maintenance	\$1,474	\$1,398	\$1,864	\$1,901	
Landscaping	\$2,875	\$1,337	\$3,899	\$3,976	
Snow Removal	\$22,763	\$22,318	\$22,763	\$23,219	
Pest Control				\$500	
Subtotal Contracts	\$95,448	\$78,635	\$101,152	\$99,716	
<u>Maintenance Expense</u>					
Emergency Calls	\$1,577	\$848	\$1,500	\$1,609	7
General Repairs & Maint	\$26,000	\$14,395	\$38,000	\$26,780	8
Garage Maintenance	\$7,650	\$428	\$2,000	\$5,000	
Additional Cleaning & Supplies	\$2,340	\$1,698	\$1,698	\$2,000	
Window Cleaning	\$2,760	\$2,725	\$2,725	\$2,725	9
Waste System	\$0	\$1,392	\$1,392	\$0	
Fire Monitoring System Maintenance	\$266	\$902	\$902	\$3,000	
Elevator	\$2,500	\$1,024	\$1,024	\$2,575	10
HVAC repairs	\$12,000	\$11,049	\$11,049	\$10,000	
Landscape Repair/Maintenance	\$1,605	\$0	\$500	\$750	
Additional Snow Removal and Salting	\$3,000	\$0	\$0	\$2,500	11
Subtotal Maintenance Expense	\$59,698	\$34,461	\$60,790	\$56,939	
<u>Administrative Expenses</u>					
Property Management Fees	\$45,056	\$34,730	\$46,307	\$59,599	12
CAO Fees		\$2,201	\$2,201	\$696	
Office Expenses	\$3,000	\$1,403	\$2,800	\$3,060	
Legal	\$1,007	\$4,371	\$5,500	\$1,038	
Insurance Expense	\$22,453	\$18,244	\$20,623	\$21,241	
Professional Fees	\$357	\$1,932	\$1,932	\$350	
Audit-Accounting	\$4,914	\$2,599	\$6,554	\$5,000	
Communications	\$204	\$390	\$520	\$585	
New Condo Act Costs	\$11,136	\$6,515	\$8,958	\$0	
Bank Charges	\$1,009	\$702	\$936	\$1,000	
Joint Use	\$0	\$0	\$0	\$1,800	13
Subtotal Admin Expenses	\$89,136	\$73,087	\$96,330	\$94,369	
<u>Contingency</u>					
Contingency				\$5,000	
Deficit Recovery	\$2,500	\$0	\$0	\$0	
	\$2,500	\$0	\$0	\$0	
Subtotal Expenses	\$425,398	\$332,331	\$453,137	\$463,904	
Reserve Appropriation	\$174,000	\$130,500	\$174,000	\$177,480	14
TOTAL EXPENSES	\$599,398	\$462,831	\$627,137	\$641,384	15
Surplus/Deficit	\$0	-\$12,226	-\$26,330	\$0	

DIRECTOR DISCLOSURE

To: CCC/OCCC/OCSCC 975

CANDIDATE:

My name: Irene Shumada

My mailing address (optional):

404 - 1201 Ohio St.

Ottawa, ON K1H 0A1

My Email Address (optional): ishumada@sympatico.ca

My Telephone Number (optional): 613-521-1508

Candidates seeking to be appointed or elected must confirm the following:

1. I am an
☐ owner currently occupying my unit at the above-mentioned condominium
☒ non-resident owner
☐ other, describe: _____
2. I am 60 days or more in arrears:
☒ No ☐ Yes
3. I or a "related person" are a party to any legal action to which the corporation is also a party:
☒ No
☐ Yes, attached is the required brief general description of the action
4. I have been convicted of an offence under the *Condominium Act* or under the regulations adopted thereto within the preceding 10 years:
☒ No
☐ Yes, attached is the required general description of the offence
5. I directly or indirectly, have a material interest in a contract or transaction to which the corporation or the declarant or declarant affiliate is a party, in a capacity other than as a purchaser, mortgagee, owner or occupier of a unit:
☒ No
☐ Yes, attached is the required description of the nature and extent of my interest in such contract or transaction

Irene Shumada

Signature of candidate

2019-02-11

Date (yyyy-mm-dd)

☐ I have attached an introductory letter and/or above required descriptions.