



Move In /Move Out Request

Congratulations on your new home! Please read, complete, and return this form to a Peloton Association Administrator as soon as you have a desired move-in or move-out date, but at least five business days prior to your desired move date.

Please make two checks payable to The Peloton Condominium Association, Inc. in the amounts of \$400.00 and \$150.00 and submit them with this form. The refundable damage deposit in the amount of \$400.00 is required and will be returned to you upon inspection of the Common Elements, following your move-in/ out. The \$150 administrative fee will be due upon each move-in and move-out to defray the cost associated with the property's physical upkeep and updating records associated with the units as a result of residents moving into and out of the community. All subsequent move- ins/ outs will be subject to this administrative fee.

A specific date, time and unloading location at The Peloton will be communicated to you prior to your move-in / move-out, which will be dependent on truck size and activities. The Community Manager will do everything possible to accommodate your first choice for a move-in or move-out date and time while leaving space for through traffic on the center drive. Please be aware that there may be more than one homeowner requesting a move on the same date. The Community Manager must confirm your requested date and time *prior* to your move-in / move-out. Please do not wait until the last minute!

Lastly, when you move out of your home at The Peloton, this should be scheduled in advance through the HOA office. Please provide a forwarding address for the return of your move-out deposit.

Thank you,

The Peloton Condominium Association
3555 Arapahoe Avenue
Boulder, CO 80303
720-279-1084

Peloton Condominium Association
Move-In/Move-Out Request
Agreement Addendum

The Peloton Condominium Association requires all moves to be scheduled/reserved in advance subject to the term and requirements within the Association's Move In/Move Out Request Agreement.

Please fill out all required paperwork from your Community website, and deliver or mail this to the Peloton Office with any required deposit checks, and administrative fee checks (two separate checks, made payable to the Association).

Reservations will not be confirmed until all the necessary paperwork and checks are received. Once received a confirmation will be provided via email or telephone call.

Per the Association's Move In/Move Out Request Agreement, all required paperwork and checks must be received by the onsite Office at least five (5) business days prior to the date of the requested move reservation for the reservation to be honored.

Per the Colorado Department of Regulatory Agencies (DORA) Community Association Manager Licensing Requirements, the Management Company is required to deposit checks received for Fees when received. Checks received for Fees cannot be held until the reservation date. For Move Reservations, Fees are defined as the Administrative Fee.

Any required deposit checks will be held until after the date of the move reservation and will not be deposited unless there is damage to the Common Areas.

Cancellations: Notice to cancel a move reservation will be subject to the terms within the Agreement for the Association.

If you have submitted payment for your move reservation, and then choose to cancel your move reservation, please send a written refund request to Community Association Assistant Manager Valerie Doubleday vdoubleday@sentrymgt.com. Include the Unit Address and date of the move reservation.

It may take 30-60 days to receive a refund check, from the date the request is received by Sentry Management. The Association only issues checks once per month, and the refund check will not be issued outside of the monthly check run.

This Addendum is in addition to The Peloton Condominium Association Move In/Move Out Request Agreement and the terms within. Please refer to your Association's Agreement for additional details.

All communication, required paperwork, and check(s) for move reservations should be directed to:

Peloton Office
3555 Arapahoe Avenue
Boulder, CO 80303
courtney.smith@Sentrymgt.com
720-279-1084



Owner Declaration of Tenancy Form

I/We _____, the Owner(s) of Unit _____ at The Peloton
Condominium Association, plan on/are renting my/our Unit to _____. The
lease term begins on _____, and ends on _____.

I/We agree to notify Management immediately of any changes to the lease term or tenancy of my/
our Unit. I/We agree to follow the Governing Documents and Rules and Regulations of The Peloton
Condominium Association regarding Tenants, including supplying an executed copy of the lease to
Management before the start of the lease term.

Owners Signature(s)

Date

Owner(s) name(s) printed



Move-in / Move-out Request

Name(s): _____ ☐ Owner ☐ Tenant

Peloton Address: _____ Arapahoe Avenue, Boulder, Colorado 80303 Unit #: _____

Phone # _____ Email Address: _____

Closing Date: _____ Dates of Lease _____ to _____

Please select a first choice and second choice date and time for your move, following your closing date. Moves are to be made within four (4) hours. No moves to be scheduled for Sunday.

1st choice move date/time:

_____/_____/_____

☐ Morning (8:30am-12:30pm) **OR**

☐ Afternoon (12:30pm-4:30pm)

2nd choice move date/time:

_____/_____/_____

☐ Morning (8:30am-12:30pm) **OR**

☐ Afternoon (12:30pm-4:30pm)

I will need use of an elevator for the move ☐ Yes ☐ No

☐ I will use a moving company **OR** ☐ I will move myself

During my move, I will need parking for the following truck or vehicle similar in size:

☐ 18-wheeler ☐ Rental truck ☐ Van or pickup truck ☐ Other _____

Please return form along with both checks to The Peloton HOA Office or by mail to:
The Peloton Condominium Association * 3555 Arapahoe Ave *Boulder, CO 80303

Deposits must be sent to the Peloton Management Office. Any additional questions may be directed to The Peloton Administrators 720-279-1084, Manager 970-966-2608, Community Care (303) 444-1456 or communitycare@sentrymgt.com

Move-In/ Out Must-Knows:

Please breakdown all cardboard moving boxes – if boxes are too large for trash chute, please use the dumpsters located at the entrance ramp to the parking garage.

These buildings are secure! You may not prop doors open while moving items in or out of the building.

Moves and any related activity are not allowed on Sundays.

Completion of this form, along with payment via check, are required prior to any move activity. Please provide this completed form along with payment as soon as possible.



Resident Information

Peloton Unit Address: ☐ 3301 ☐ 3401 ☐ 3601 ☐ 3701 Arapahoe Avenue Unit #: _____

Name:
Phone:
Email:

Resident is: ☐ Owner ☐ Tenant ☐ Family Member ☐ Other: _____

Other Unit occupants:

Name	Phone	Email	Relationship

Rental Management Company ☐ n/a

Name:	
Email:	
Phone:	

Vehicle Information ☐ n/a ☐ Electric Vehicle

Make	Model	Color	Plate

Assigned parking space(s) number: _____

Storage unit(s) number: _____ ☐ n/a

Bicycle Registration Numbers: _____ ☐ n/a

(Note: Unregistered bikes parked in common areas are subject to removal)

Pets: ☐ n/a

Type (ie dog, cat, fish)	Breed	Name

Swiftlane (Entry System) ☐ Decline at this time (See an Association Administrator to be added later)

Name	Email

THE PELOTON CONDOMINIUM ASSOCIATION, INC.

COMMUNITY CENTER WAIVER AND RELEASE

In consideration of being allowed use of the community center operated by the Peloton Condominium Association, Inc. ("Association") I, the undersigned, hereby agree as follows:

1. I have read, understand, and agree to follow the Association's rules and regulations regarding use of the community center.
2. I am fully able to understand and evaluate the risks and hazards of using the community center and its equipment and amenities.
3. If I believe conditions are unsafe, I will immediately discontinue use of the community center and immediately report such conditions to onsite staff.
4. I fully understand that use of the community center and its amenities involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others, the conditions in which the activity takes place, and/or the negligence of others; and that there may be other risks either not known to me or not readily foreseeable at this time.
5. I and my successors, heirs and representatives hereby waive, release, and discharge the Association from and against any and all claims of liability that I may have or that may result from my use of the community center regardless of cause and I hereby agree not to sue and to indemnify and hold harmless the Association, its directors, officers, agents, employees, members, managers, and employees from and against any and all claims, liabilities, losses, demands, and costs (including reasonable attorney fees) including any property damage, personal injury, or death that I may suffer or that may result from my use of the community center and its amenities regardless of cause.
6. I shall promptly pay to the Association the full amount of any cost, loss or damage which the Association sustains and/or incurs, or for which the Association may become liable as a result of my use of the community center.
7. I hereby assume and fully accept all risks and responsibility of losses, cost, and damage I may incur as a result of my use of and/or presence at the community center regardless of cause.
8. Although I acknowledge that there is no obligation for any person to provide me with medical attention in connection with my use of the community center, I hereby consent to any such care or attention that may be provided to me.
9. I have read and fully understand the statements made herein and I voluntarily sign this Waiver and Release intending to be bound by its terms. I understand that I have given up substantial rights by signing it and have signed it freely and without an inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect. I intend that this Waiver and Release be interpreted and construed as broad and inclusive as is permitted by the laws of the State of Colorado.
10. If I am executing this Wavier and Release as a parent/guardian, I understand and agree to the above for my minor.

Print Name: _____

Date: _____

Signature: _____

Address: _____

Phone Number: _____

Print Parent/Guardian Name (if under 18 years of age): _____

Parent/Guardian Signature (if under 18 years of age): _____