

**A M A C O N**

L I V E W E L L

**Warranty Services  
Work Order**

Phone: (905) 848-2069 Fax:(905) 848-2827

<b>Location</b>	<u>Eve - Tower: 1 - Unit: 1103</u> <u>1103 - 3515 Kariya</u>
<b>Closing Date</b>	0000
<b>Date</b>	07Jan09
<b>Contact Name(s)</b>	Louis C.T. Huang and Veronica M.L.S. Huang
<b>Contact Telephone#</b>	
<b>Company:</b>	<u>Kabinetz</u>
<b>Attention:</b>	<u>Paul Cammalleri</u>
<b>Telephone:</b>	
<b>Fax:</b>	
<b>From:</b>	<u>Warranty Services Department - Head Office</u>

Please complete the following items:			
Deficiency Number	Issue	Appointment Date/Time	Notes
3909	MAIN BATHROOM- VANITY CABINETS-RIGHT CABINET DOOR @ TOP SCRATCHED & BOTTOM SEETAPE & 1 ON RIGHT SIDE OF DRAWER		

Date Completed: \_\_\_\_\_

Amacon Customer Care Signature: \_\_\_\_\_

Please schedule your Service Department to complete work on the above Unit. Should no appointment time or date appear (below) on this form, it is your responsibility to arrange and adhere to the appointment you have scheduled. Your service representative **must have** this form signed by homeowner on completion. Please fax the signed form to our office (905) 848-2827.

**Failure to comply with this request will give Amacon Developments (and it's group of companies) the right to carry out any and all repairs. All costs incurred will be applied to the Company listed above.**

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ID# 3909 Eve Ph 1 Lot 1103