

AMACON

LIVE WELL

Warranty Services

Work Order

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

Location	Eve - Tower: 1 - Unit: 1106
	1106 - 3515 Kariya
Closing Date	0000
Date	18Dec08
Contact Name(s)	Hang Duong
Contact Telephone#	
Company:	Lisi Mechanical
Attention:	
Telephone:	
Fax:	(416) 674-5309
From:	Warranty Services Department - Head Office

Please complete the following items:				
Deficiency Number	Issue		Appointment Date/Time	Notes
1220 ✓	MAIN BATHROOM- TUB-overflow plate loose	✓		
1221 ✓	MAIN BATHROOM- TOILET-seat lid scratched	✓		as before
1223 ✓	ENSUITE BATHROOM- TUB-SILICONE SPOUT	✓		
1224 ✓	ENSUITE BATHROOM- TOILET-lid scratched	✓		as before
1234 ✓	KITCHEN- SINK-gap around sink, not kevel	✓		

Date Completed: 18 Dec 2008

Frank Corsetti

Amacon Customer Rep Signature: [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.