AMACON

Warranty Services Work Order

LIVE WELL

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

| Location | Eve - Tower: 1 - Unit: 1209 |
|--------------------|--|
| | <u> 1209 - 3515 Kariya</u> |
| Closing Date | 0000 |
| Date | 18Dec08 |
| Contact Name(s) | Diane Williams |
| Contact Telephone# | |
| Company: | Lisi Mechanical |
| Attention: | |
| Telephone: | |
| Fax: | <u>(416) 674-5309</u> |
| From: | Warranty Services Department - Head Office |

| D 6 4 | omplete the following items: | Appointment | Notes |
|----------------------|---|-------------|-------|
| Deficiency Number | Issue | Date/Time | |
| • | LIVING/DINING ROOM- ELECTRICAL/LIGHTING-heat not on /fancoil wires not attached | | |
| | KITCHEN- SINK-noo water pressure from faucet | | |

| Date Completed: DEC 18, 2008 | comp Con | يدك |
|-------------------------------|----------|-----|
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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)

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# 1355/1362 Eve Ph 1 Lot 1209

https://apps.prospectin.com/amacon/_builder/AMAServiceCall.php3?var_Centre=Eve&v... 12/18/2008