

Forms - Work Order - Logged in user is: Mark Fritz

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**AMACON****Warranty Services****Work Order**

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

Location	<u>Eve - Tower: 1 - Unit: 2107</u>
Closing Date	<u>2107 - 3515 Kariya</u>
Date	<u>0000</u>
Contact Name(s)	<u>30Dec08</u>
Contact Telephone#	<u>Angela He</u>
Company:	<u>Megacity Tile</u>
Attention:	
Telephone:	
Fax:	<u>(905) 761-0990</u>
From:	<u>Warranty Services Department - Head Office</u>

Please complete the following items:

Deficiency Number	Issue		Appointment Date/Time	Notes
6654	ENSUITE BATHROOM- TUB-CHIPPED TILE ?	✓	17 JAN 09	0.5.
6666	KITCHEN- BACKSPLASH-MISSING @ WINDOW WALL	✓		

Date Completed:

Jan 20/2009

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# 6654/6666 Eve Ph 1 Lot 2107