

AMACON

LIVE WELL

**Warranty Services
Work Order**

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

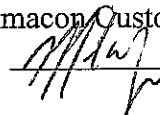
Location	<u>Eve - Tower: 1 - Unit: 3205</u> <u>3205 - 3515 Kariya</u>
Closing Date	<u>0000</u>
Date	<u>12Feb09</u>
Contact Name(s)	<u>Liqun Fu</u>
Contact Telephone#	
Company:	<u>Cartier Kitchens</u>
Attention:	<u>Sam Harrison</u>
Telephone:	
Fax:	<u>(905) 793-6720</u>
From:	<u>Warranty Services Department - Head Office</u>

Please complete the following items:				
Deficiency Number	Issue		Appointment Date/Time	Notes
7694	Main Bathroom- cut out shelf for access panel	✓	✓	
11554	KITCHEN- CABINETS-unfinished area to left of microwave, in corner above backsplash, see tape		—	Kitchens
11555	KITCHEN- CABINETS: 1-unfinished trim panel to left of microwave, see tape		—	
11556	KITCHEN- CABINETS: 2-finishing trim showing uppercabinet to right of microwave, see tape		—	
11557	KITCHEN- CABINETS: 3-scratches top of lazy susan cabinet, see tape		—	
11558	KITCHEN- CABINETS: 4-finishing trim showing uppercabinet to right of window above dishwasher, see tape		—	

Date/Completed:

Feb 13/09 18

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)