AMACON

LIVE WELL

Warranty Services Work Order

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

Location Eve - Tower: 1 - Unit: 1208

1208 - 3515 Kariya

Closing Date 0000 13Feb09 Date

Contact Name(s) Matin Mazloum and Badi Abdolmaleki

Contact Telephone#

Company: Amacon Service Attention: Carlos Bravo

Telephone:

Fax: (905) 848-2827

Warranty Services Department - Head Office From:

Please complete the following items:							
Deficiency Number	Issue /		Appointment Date/Time	Notes			
10988	FOYER / ENTRY- WALLS-right small wall by mirror scratched -see tape		1				
	FOYER / ENTRY- DOORS-doorframe scratched top and both sides -see tape						
¹⁰⁹⁹⁰ \checkmark	FOYER / ENTRY- CLOSET-dpanel missing screw -see tape		1				
	ZIVING/DINING ROOM- ELECTRICAL/LIGHTING-fancoil missing filter -see tape						
	ZIVING/DINING ROOM- WINDOWS-alUMINUM frame scratched top left-see tape		V				
10994	LIVING/DINING ROOM- WINDOWS: 1-alUMINUM casing scratched centre and left by slider -see tape		i/				
10995	LAVING/DINING ROOM- WALLS- wall between bath and laundry closet below light switch patchy and black marks -see tape		Ì				
10996	LIVING/DINING ROOM- WALLS: 1- baseboard right wall chipped and bumpy -see tape						
10997	MASTER BEDROOM- WALLS- yellow patch rightside of electrical panel -see tape		 /				

10998	MASTER BEDROOM- WALLS: 1- black marks above fire alarm signal panel -see tape		
10999	MASTER BEDROOM- WALLS: 2- right wall black mark -see tape		
11000	MASTER BEDROOM- WALLS: 3- hole in wall left of bulkhead by window -see tape		
	MASTER BEDROOM- CLOSET- access panel in closet missing cover - see tape		
11002	MASTER BEDROOM- WINDOWS- alUMINUM casing scratched leftside - see tape		
1 1/1	MAIN BATHROOM- DOORS- doorframe leading into bath chipped - see tape		

Date Completed:

Castomer 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#

10988/10989/10990/10991/10993/10994/10995/10996/10997/10998/10999/11000/11001/11002/11003 Eve Ph 1 Lot 1208