KITCHEN- APPLIANCE-dishwasher



Warranty Services Work Order

LIVE WELL

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

Location	Eve - Tower: 1 - Unit: 2201
	<u> 2201 - 3515 Kariya </u>
Closing Date	0000
Date	31Mar09
Contact Name(s)	<u>Lynette James</u>
Contact Telephone#	
Company:	Amacon Service
Attention:	Carlos Bravo
Telephone:	
Fax:	<u>(905) 848-2827</u>
From:	Warranty Services Department - Head Office
Please complete the fol	lowing items:
Deficiency Issue	Appointment Notes

Date Completed:

MARCA 23/09

handle scratched

Number

6763

Amacon 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# 6763 Eve Ph 1 Lot 2201

Date/Time