AMACON

Upontro sor og

Warranty Services Work Order

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

Eve - Tower: 1 - Unit: 2501 Location

2501 - 3515 Kariya

Closing Date Date

0000 28Jan09

Contact Name(s)

Slawomir Pylypec

Contact Telephone#

Company: Attention:

Amacon Service Carlos Bravo

Telephone:

Fax:

(905) 848-2827

From:

Warranty Services Department - Head Office

Please complete the following items:							
Deficiency Number	Issue		Appointment		Notes		
			Date/Time				
6997 /	FØYER / ENTRY- DOORS-mark						
	frame left side where taped		12				
5998	FOYER / ENTRY- CLOSET-ADJUST	·		Mar.			
	door						
7000 /	LIVING/DINING ROOM-		0	*			
V	WINDOWS-marks on alUMINUM trim	i					
	where taped						
7001	ZIVING/DINING ROOM- WALLS- drywall rough upper centre left wall		garage and				
	where taped	,					
7002	LIVING/DINING ROOM- WALLS: 1-						
1002	customer advises drywall tape is loose			ļ			
	where taped						
7005 🗸	MASTER BEDROOM- WALLS-seam		- AV				
	showing drywall where taped		4 /				
⁷⁰⁰⁶ 🗸	MASTER BEDROOM- WALLS: 1-						
	holes in drywall above door						
7007 J	MASTER BEDROOM- DOORS-chip						
	interior of entry door where taped	<u> </u>	<u> </u>				
7008	MASTER BEDROOM- FLOORING-		الشناء المتعادم	Λ	A		
	GLEAN CARPET			Clean	corisos		
7009 U	MAIN BATHROOM- TUB-mark top				74800000		
	front of tub where taped	<u> </u>		14			
7010	MAIN BATHROOM-						
	COUNTERTOPS-clean glue/silicone						

Forms - Work Order - Logged in user is: Mark Frit	Z	rage 2 01 2
where taped	International	
7011 MAIN BATHROOM- VANITY CABINETS-remove silicone from handle	A special series	<i>y</i> .
7013 KITCHEN- CABINETS: 1-paint front of island where taped		
7014 KITCHEN- WALLS-DRYWALL DENTED bulkhead above stove		
7015 KITCHEN- WALLS: 1-marks on wall by telephone jack where taped	2	
7016 KITCHEN- WALLS: 2-DRYWALL DENTED by end of island where taped	The state of the s	

Date Comp	leted:	1 0 x
near Williams	-39/	_1\/
***************************************	· 'y	, A

us/onner 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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