



March 16, 2009

Copy to:

Jose Roy Torres  
3515 Kariya Dr 2901  
MISSISSAUGA ON  
L5B 0C1

Amacon Development (Huronario) Corp.  
2 Harbour St.  
TORONTO Ontario  
M5J 3B1

Enrolment # H1512418  
Case # 2364869

Vendor/Builder # 33372  
Lot: Pt. 16, Plan: , Block:

Mississauga, City

**Confirmation of Receipt of your 30-Day Form**

This notice is to inform you that we received your 30-Day Form and are accepting it based on the Date of Possession, February 17, 2009, of record for your home. Please note that this is the only 30-Day Form we can accept for your home, as outlined in the *Homeowner Information Package*.

All items noted on your 30-Day Form that are part of your unit and are covered by warranty under the *Ontario New Home Warranties Plan Act* ("statutory warranty") should be repaired or otherwise corrected by your builder by July 20, 2009, except as noted below\*. If any of these items have not been corrected by this date, you may contact us between July 21, 2009 and August 19, 2009 to request a conciliation inspection of your home to assess the situation. If you do not contact us during this time period to request a conciliation inspection, we will consider all items listed on your 30-Day Form resolved and the matter closed. (You may resubmit the item(s) at a later date if the warranty covering those item(s) is still in effect.)

Because it can take several months for the natural materials in your home to dry and settle, new items may emerge over time. Your next opportunity to report to us any items that are covered by the statutory warranty occurs during the last 30 days before the first anniversary of possession of your home. During that period, you may report any such items by submitting the Year-End Form to us and sending a copy to your builder. (See your *Homeowner Information Package* for more details.)

The repair timelines listed above do not apply to items included in your condominium project's common elements because such items are not covered by your unit's statutory warranty. You should report these items in writing to the condominium corporation's Board of Directors. (For a complete description of your unit's boundaries, refer to Schedule "C" of the declaration of your condominium, which should be included with your Disclosure Statement.)

\* Please note there are specific situations - such as emergencies and completion of your new home's landscaping - in which this timeline does not apply. Please refer to the *Homeowner Information Package* for more information about the Statutory Warranty Process and exceptions to it.

You may wish to visit our website to consult the *Construction Performance Guidelines*. The Guidelines describe many of the most commonly reported warranty items and indicate which are covered by warranty under the *Ontario New Home Warranties Plan Act*.



# 30-Day Form

**TO NOTIFY TARION OF OUTSTANDING WARRANTY ITEMS, COMPLETE AND SUBMIT THIS FORM  
BEFORE THE END OF THE FIRST 30 DAYS OF POSSESSION OF YOUR HOME.**

**YOU MAY SUBMIT ONLY ONE 30-DAY FORM.**

Submit this Form to the Tarion Customer Centre, located at 5150 Yonge Street, Concourse Level, Toronto, Ontario M2N 6L8, in person, by mail or courier, or by fax to 1-877-664-9710. See your *Homeowner Information Package* for details about submitting this Form. Send a copy of the completed Form to your Builder and keep a copy for yourself. Please print all information.

**Home Identification Information** (Refer to your Certificate of Completion and Possession to complete this box.)

2009 / 02 / 17		33372	1512418
Date of Possession (YYYY/MM/DD)		Vendor/Builder #	Enrolment #
<b>Civic Address</b> (address of your home under warranty).			
3515	KARIYA DRIVE	2901	
Street Number	Street Name	Condo Suite # (if applicable)	
MISSISSAUGA	L5B 0C1		
City/Town	Postal Code	Lot #	
<b>Contact Information of Homeowner(s):</b>			Project/Subdivision Name
JOSE ROY TORRES			
Homeowner's Name			Homeowner's Name (if applicable)
(647) 588 - 3124			( ) -
Daytime Phone Number			Daytime Phone Number
(647) 588 - 3124			( ) -
Evening Phone Number			Evening Phone Number
( ) -			( ) -
Fax Number			Fax Number
jroyft@gmail.com			
Email Address			Email Address
Check this box if you are not the original registered homeowner.			Check this box if you are not the original registered homeowner.

**Mailing Address for Correspondence to Homeowner** (if different from Civic Address above)

Street Number	Street Name	Condo Suite # (if applicable)
City/Town	Province	Postal Code

