

AMACON SERVICE REQUEST FORM
PLEASE MAIL, FAX OR SUBMIT ON-LINE
AMACON CONSTRUCTION LTD. ATTENTION: CUSTOMER CARE
2 HARBOUR STREET, TORONTO, ON M5J 3B1
TEL: 416-369-9069 FAX: 416-369-9068
www.amacon.com

NAME: MARIO ANGEL SUITE # :- 307

DEVELOPMENT NAME: AMACON DEVELOPMENT HURONTARIO

ADDRESS: 3515 KARIYA DR.

RES.TEL: 905-890-9392 BUS.TEL: _____

CELL: 905-302-8005 FAX: 905-949-9814

DATE OF REQUEST: FEB 3, 09

A copy of your request form will be given to and reviewed by an Amacon Customer Care Representative. Your request and any follow up that may be required will be co-ordinated by one of our Customer Care Representatives to ensure that your concerns are addressed.

Service Request:

1. ELECTRICAL SOCKET NOT WORKING IN LIVING ROOM
ALSO PLEASE CHECK ALL SOCKETS
2. _____
3. _____
4. _____