AMACON DEVELOPMENT

AMACON SERVICE REQUEST FORM

PLEASE MAIL, FAX OR SUBMIT ON-LINE

AMACON CONSTRUCTION LTD.

2 HARBOUR STREET, TORONTO, ON [illegible]

TEL: [illegible] FAX: [illegible] 905-232-4637 (Fax no Amacon Customer Care)
or (905)882-4686

ATTENTION CUSTOMER CARE: 3515 KARIYA DR.

TEL: [illegible] FAX: [illegible]

NAME: Santo Lopez **SUITE #** 1006

DEVELOPMENT NAME: ______ **ADDRESS:** ______

RES.TEL.: 905-277-5006 **BUS.TEL.:** ______ **CELL:** 416-433-4719

FAX: ______ **EMAIL:** ______

DATE OF REQUEST: Aug. 31/09

SERVICE REQUEST:

1. AIRCON NOT COOL IN THE MORNING + AFTERNOON
2. but in the evening it is fine.
3.
4.
5.
6. [signature]
7.
8.
9.
10. I authorize someone to check it inside our suite.

[signature]

suite 1006 we
Scan to pass.

AMACON DEVELOPMENT

AMACON SERVICE REQUEST FORM

PLEASE MAIL, FAX OR SUBMIT ON-LINE

AMACON CONSTRUCTION LTD.

2 HARBOUR STREET, TORONTO, ON M5J3B1

TEL:416-369-9069 FAX: 416-369-9068

DONE

ATTENTION CUSTOMER CARE: 3515 KARIYA DR.

TEL:905-848-2069 FAX: 905-848-2827

NAME: BERNABE LOPEZ . **SUITE #** 1006 .

DEVELOPMENT NAME: _____ ADDRESS: 3515 KARIYA DR. .

RES.TEL: 905 277 5006 .BUS.TEL: _____ CELL: _____ .

FAX: _____ . EMAIL: _____ .

DATE OF REQUEST: MAR 30/09 .

SERVICE REQUEST:

1. NO HOT AIR - NO HEAT, FILTER IS DIRTY .
2. CALL FIRST WIFE IS HOME, W/ ~~HOME~~ BABY .
3. _____ .
4. _____ .
5. _____ .
6. _____ .
7. _____ .
8. _____ .
9. _____ .
10. _____ .

Re-Suite 1006
Scan to pass

AMACON DEVELOPMENT

AMACON SERVICE REQUEST FORM

PLEASE MAIL, FAX OR SUBMIT ON-LINE

AMACON CONSTRUCTION LTD.

2 HARBOUR STREET, TORONTO, ON M5J3B1

DanR

TEL:416-369-9069 FAX: 416-369-9068
OR (905)232-4636
ATTENTION CUSTOMER CARE: 3515 KARIYA DR.

TEL:905-848-2069 FAX: 905-848-2827

NAME: BERNABE AND SANTA LOPEZ . SUITE # 1006 .

DEVELOPMENT NAME: AMACON ADDRESS: 3515 KARIYA .

RES.TEL: 905-858-3543 .BUS.TEL: _____ CELL: _____ .

FAX: _____ . EMAIL: _____ .

DATE OF REQUEST: JUNE 19/09 .

SERVICE REQUEST:

1. WASHING MACHINE LEAKING ON FRONT (FLOOD). EMERGENCY.
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

I AUTHORIZE BUILDER TO ENTER THE APARTMENT

eve 1006
scan to Pass

DONE MARCH 2

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: SANTA LOPEZ

DEVELOPMENT NAME:

ADDRESS: 3515 KARIYA DR. STE. 1006

RES.TEL: 905-277-5006 BUS.TEL:

CELL: FAX:

DATE OF REQUEST: FEB. 27/09

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. THERMOSTAT IN LIVING ROOM NOT WORKING
2.
3.
4.

I AUTHORISATION TO GO INTO SUITE FOR WORK

Lopez