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1509
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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: Esteban Pacheco Suite #1509

DEVELOPMENT NAME: Eve

ADDRESS: 3515 Kaeleya Drive

RES.TEL: _____ BUS.TEL: _____

CELL: 416-801-4263 FAX: _____

DATE OF REQUEST: _____

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:

- DOWR*
- * 1. Main bathroom sink Leaking.
2. Wall not painted ~~not~~ after wall was patched after fixing heating issue. (Paint required: Grey Ghost - Dulux)
3. _____
4. _____

I'll be available on the site whenever required to provide access.