Sent to
Maule | Manesh
Nov 4/2009

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 (Faxed Amacon Customer Care)
(905) 362-4636

ATTENTION CUSTOMER CARE: [illegible] KARIYA DR.

TEL: [illegible] FAX: [illegible]

NAME: MICHELLE RAZA **SUITE #:** 609

DEVELOPMENT NAME: AMACON-EVE **ADDRESS:** 3515 KARIYA DR

RES TEL: ______ **BUS TEL:** 905-712-1084 X. 3202 or 23202 **CELL:** 647-209-1303

FAX: ______ **EMAIL:** ______

DATE OF REQUEST: Nov 3rd/09

SERVICE REQUEST:

1. THE WASHING MACHINE FILLS & WASHES WITH
2. BOILING/STEAMING WATER EVEN WHEN I HAVE THE
3. SETTING ON EITHER COOL OR COLD. I NOTICED THIS
4. SINCE MID-OCTOBER. I NEVER USE THE HOT OR WARM
5. SETTING.
6.
7.
8.
9.
10.

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: MICHELLE RAZA SUITE # 609

DEVELOPMENT NAME: _____

ADDRESS: 3515 KARIYA DR

RES.TEL: 647-209-1303 BUS.TEL: 905-712-1684 x.3202

CELL: " FAX: —

DATE OF REQUEST: MARCH 25/09 (ANYTIME BEFORE JUNE 19/09)

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. LOWER KITCHEN CABINET (BESIDE STOVE) → DOOR BROKE OFF HINGE & HANGING OFF
2. _____
3. _____
4. _____

I AUTHORISE SUITE ENTRY