

## LIVE WELL\*

## **AMACON CONSTRUCTION SERVICE REQUEST FORM**

## PLEASE FAX TO 416 369-9068

F ELMSE I MA 10 410 303-3000					
NAME: Tayway Whan  TEL:  CELL: 4/6 (09 9/5 7  DATE OF REQUEST: 23-09-2010		BUS. TEL:			
			must be bas of the PDI ( soon as a po If your cond	sed on the Tarion Warranty guideling (Pre-Delivery Inspection). Your reque pssible. If this is an <b>Emergency</b> please	epresentative, this form becomes property of Amacon. Your requeses - scratches, nicks, dents are not warrantable, unless noted at timest will be reviewed and addressed by an Amacon Representative are contact your concierge immediately at (289) 521-1313 - 24 / hours Element Warranty Guidelines, please see Property Management to
			ITEM#	ROOM/LOCATION	DESCRIPTION
				Master WASHIROCK	PLEACE GET THE COCHING IN  AND ARGINDO THE TUB REDONC  AS THE YOR IS IVEZ CLEARY  ALSO PLEACE GET IT DONG  ILT THE BOTTOM OF THE TUB  ALSO.
SERVICE	PERSON				
	American Constitution of the Constitution of t	57/09/2010			

HOMEOWNER SIGNATURE