

A M A C O N

L I V E W E L L TM

AMACON CONSTRUCTION SERVICE REQUEST FORM

PLEASE FAX TO 416 369-9068

File 1509

NAME: Sulochana VEERABOYMA SUITE: 1509

TEL: 416-303-1097 BUS. TEL: _____

CELL: _____ E-MAIL: _____

DATE OF REQUEST: 23/11/2010 Permission to enter on scheduled date:

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Once received by an Amacon Customer Care Representative, this form becomes property of Amacon. Your request must be based on the Tarion Warranty guidelines - scratches, nicks, dents are not warrantable, unless noted at time of the PDI (Pre-Delivery Inspection). Your request will be reviewed and addressed by an Amacon Representative as soon as a possible. If this is an **Emergency** please contact your concierge **immediately** at (289) 521-1313 - **24 / hours**. If your concern falls under the Common Area Element Warranty Guidelines, please see Property Management to address your concerns or call at (289) 521-1199.

ITEM#	ROOM/LOCATION	DESCRIPTION
1	Kitchen	One of the bulb in kitchen light not working

SERVICE PERSON

[Signature]
HOMEOWNER SIGNATURE

23/11/2010
DATE