

AMACON SERVICE REQUEST FORM
PLEASE MAIL, FAX OR SUBMIT ON-LINE
AMACON CONSTRUCTION LTD. ATTENTION: CUSTOMER CARE
37 BAY STREET, SUITE 400 (4TH FLOOR), TORONTO, ON M5J 3B2
TEL: 416-369-9069 FAX: 416-369-9068
www.amacon.com

NAME: Ruby mayer

DEVELOPMENT NAME: _____

ADDRESS: 3525 KARIYO Dr. # 2309

RES.TEL: _____ BUS.TEL: _____

CELL: 416-5782280 FAX: _____

DATE OF REQUEST: JAN 17/11

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. Floor board popped by side chair in Living Room

2. _____ Review Condition of unit, handout

3. Authorize side entry

4. R mayer