

## Warranty Services Service Call

**Company:** York Sheet Metal  
**Attention:** Gerry Edelenbos  
**Telephone:**  
**Fax:** (905) 850-0573  
**From:** Ed Valencia  
**Date:** 03Jan11  
**Location:** Site: Elle Phase: Elle Lot: 312  
877 WETHERBYLANE MISSISSAUGA  
**Contact Name(s):** and  
**Contact Telephone#** Res: (905) 276-6883

*Elle  
312  
WETHERBYLANE*

Please schedule your Service Department to complete work on the above Unit. Should no appointment time or date appear (below) on this form, it is your responsibility to arrange and adhere to the appointment you have scheduled. Your service representative **must have** this form signed by homeowner on completion. Please fax the signed form to our office (905) 848-2827.

**Failure to comply with this request will give Amacon Developments (and it's group of companies) the right to carry out any and all repairs. All costs incurred will be applied to the Company listed above.**

### Please complete the following items:

Issue	Appointment Date	Appointment Time	Completion Date
vent is not working			

Date Completed: JAN 4/11

Purchaser Signature: *[Signature]*

Faxed:						
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Back

ID# 24719 Elle Ph Elle Lot 312