



1000 W 6th St

AMACON CONSTRUCTION SERVICE REQUEST FORM

PLEASE FAX TO 416 369-9068

NAME MICHAEL CHAN

SUITE 315

TEL

BUS TEL

Cell 647-588-1384

e-mail:

Project

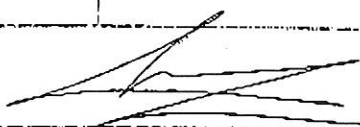
Address:

DATE OF REQUEST AUG 22, 2012 Permission to enter

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 Taron 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	Master bath Room	Toilet - leaking.


HOMEOWNER SIGNATURE

AUG 22, 2012
DATE: