



3104

## AMACON CONSTRUCTION CUSTOMER CARE REQUEST FORM

THE RESIDENCES AT PARKSIDE VILLAGE (TOWER 1) FAX: (905)-232-4637 & (416)-369-9068

SUITE

Aaryan Verma

NAME

TEL	(905) 267-0909.	BUS. TEL
CELL	(647) 882-2468	EMAIL <u>aaryan.dec@gmail.com</u>
DATE OF	REQUEST March. 11. 201	YES NO YES NO
(Pre-Deliver possible. If t falls under t	n the Tarion Warranty guidelines - scra y Inspection). Your request will be re his is an Emergency please contact vo	resentative, this form becomes property of Amacon. Your request must tches, nicks, dents are not warrantable, unless noted at time of the PDI eviewed and addressed by an Amacon Representative as soon as a pur concierge immediately at (905) 232-6077- 24 / hours. If your concern Guidelines, please see Property Management to address your concerns
ITEM#	ROOM/LOCATION	DESCRIPTION
	laundry Loom	Malfunctioning washer Lystem - Mobes  10ud hoise with loss of Shahing É novewent.
HOMEOWN	VER SIGNATURE	DATE