

A M A C O N

LIVE WELL™

AMACON CONSTRUCTION CUSTOMER CARE REQUEST FORM

THE RESIDENCES AT PARKSIDE VILLAGE (TOWER 1)

FAX: (905)-232-4637 & (416)-369-9068

NAME Shashikala Ragoonanan SUITE 3407
TEL 416-524-2391 BUS. TEL _____
CELL 416-524-2391 EMAIL shashi@home4all.ca

DATE OF REQUEST Jan 26/13

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 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 (905) 232-6077- 24 / hours. If your concern falls under the Common Area Element Warranty Guidelines, please see Property Management to address your concerns or call at (905) 232-8855

| ITEM# | ROOM/LOCATION | DESCRIPTION |
|-------|---------------|---------------------|
| 01 | 1 | Heating not working |
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| | | |
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Shashi Ragoonanan
HOMEOWNER SIGNATURE

Jan 26/13
DATE