

AMACON

LIVE WELL

Warranty Services
Phone: (905) 232-4636
Fax: (905) 232-4637

Work Order

Location: THE RESIDENCES AT PARKSIDE VILLAGE - ONE - Suite: 205
Today's Date: 07Nov16
Company: Amacon Customer Care - Site
Attention: Sandy Cardoso
Telephone:
Fax: (905) 232-4637

Please Complete the following items:

Deficiency Number	Issue		Appt. Date/Time	Notes
72159 <i>done</i>	FOYER / ENTRY- WALLS~DRYWALL right top of cLoSet cracked	✓		✓
72164 <i>done</i>	FOYER / ENTRY- DOORS~entry door does not close all the way on its own	✓		✓
72160 <i>done</i>	LIVING/DINING ROOM- FLOORING~BASEBOARD under window needs dap	✓		✓
72168 <i>done</i>	LIVING/DINING ROOM- WINDOWS~left of BALCONY DOOR caulking chipping	✓		✓
72171 <i>done</i>	MASTER BEDROOM- CLOSET~back right corner of wall above BASEBOARD cracked	✓		✓
72161 <i>done</i>	MAIN BATHROOM- WALLS~top left outside door frame needs dap	✓		✓
72172 <i>done</i>	MAIN BATHROOM- DOORS~PAINT scratch right side of outside of door equal distance as handle from floor bottom of door excess paint	✓		✓
72177 <i>done</i>	MAIN BATHROOM- TUB~TOUCH-UP left side tile beading marked all the way down check water pressure in shower caulk outside bottom tub to floor	✓ <i>Trade</i> ✓		Pressure ok ✓

72173 <i>done</i>	MAIN BATHROOM- VANITY CABINETS~loose toilet paper holder	✓		✓
72180 <i>done</i>	KITCHEN- BACKSPLASH~PATCH corner below gfci switch to left of sink	✓		✓

Date Completed: Nov 9/16

Amacon Customer Care Signature: _____

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) 232-4637.

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.

Date: _____

Homeowner (or Homeowner Rep.) Signature: _____