

Bellaire Properties Inc.
 331 Cityview Boulevard, Suite 300
 Vaughan, ON L4H 3M3
 Tel: (905)832-2023 Fax: (905)832-1926

Supplier:

Ship To:

Medi Group Incorporated
 56 Brockport Drive
 Toronto, ON M9W 5N1
 Tel: (416)741-2737 Fax: (416)741-1593

Bellaire Properties Inc.
 Bellaire Properties Inc.
 331 Cityview Boulevard, Suite 300
 Vaughan, ON L4H 3M3

(medigrou)

Purchase Order: 2060.05-01-000890

Disc. Terms:	Not Applicable	Order By:		Order Date:	04/21/2022
Terms Code:	45 days	Taken By:		Date Req:	
Retention:	10%	Purch. Agent:		Req. No:	

Line	Description	Quantity UofM	Unit Cost	Total Amount	Disc%	Draw%	Amount Due
<i>Project: Bellaire Properties Inc. Phase: Phase 5 Lot: 0024 Model/Elev.: Madawaska - 47' Detached-3190 S.F. Corner/A Swing: N/A Craft: 1280 - Masonry Labour</i>							
0010	Provide 10ft ceilings on the main floor in lieu of standard. *Does not include areas where bulkheads are required. *Window sizes will be increased by 6" in height, based on standard white window frames; Front door and patio sliding doors to be increased to 8ft (height), based on standard door style / hardware / trim package. This does not include the door from house to garage (if applicable) *Note: There will be an approximate 1ft gap between the upper cabinets and bulkhead in the kitchen and / or approximate 2ft gap between upper cabinets to ceiling if bulkhead is not required. Alloc: H,HOM,2060.05,0024,3080,2	1.00	Is				
0020	Provide 9ft ceilings on the 2nd floor, with 8ft interior door heights, in lieu of standard. *Does not include areas where bulkheads are required. *Window sizes will increase by 6" in height, based on standard white window frames. *All interior doors on the 2nd floor to be increased to 8ft, based on standard door style / hardware/ trim package. Alloc: H,HOM,2060.05,0024,3080,2	1.00	LS				
0030	PLEASE NOTE: ** Exhaust vent - Provide 8" Exhaust vent in kitchen area in lieu of standard 6". (Does not include kitchen hood fan that accommodates 8" vent) Alloc: H,HOM,2060.05,0024,3080,2	1.00	LS				

Sub-Total:
 Taxes: 0.00
Total:

_____ **Date:** _____ **Date:** _____
 Medi Group Incorporated Bellaire Properties Inc.

Please submit copy of PO with invoice for payment.