

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

Supplier:

Advance Marble & Granite Ltd.
 157 Toryork Dr.
 Toronto, ON M9L 1X9
 Tel: (416)748-0800 Fax:

(advancem)

Ship To:

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

Purchase Order: 2060.05-01-001815

Disc. Terms:	Not Applicable	Order By:		Order Date:	07/20/2022
Terms Code:	30 days	Taken By:		Date Req:	
Retention:	10%	Purch. Agent:		Req. No:	

Line	Description	Quantity UofM	Unit Cost	Total Amount	Disc%	Draw%	Amount Due
Project: Bellaire Properties Inc. Phase: Phase 5 Lot: 0015 Model/Elev.: Superior2C - 38' Detached - 3615 S.F.-2 Car/B Swing: N/A Craft: 1481 - Kitchen Granite Countertops							
0010	** BUILT-IN APPLIANCE PROVISION, includes the counter-depth fridge enclosure, wall/micro cabinet & electrical, cut out for 36" cooktop with pot and pan drawers below. Alloc: H,HOM,2060.05,0015,3190,2 C/O #1 - (07/20/2022) Incorrect price	1.00 ls	150.0000	150.00			150.00
	LEVEL 6 UPGRADE PRICE		585.0000	585.00			585.00
0010	Revised - Line No. 0010	1.00 ls	735.0000	735.00			735.00
0020	KITCHEN LAYOUT CHANGE AND EXTENSION - Layout sketch attached Relocate the sink and dishwasher to stove wall. Add a potlight above the sink. Provide and install 4ft wide by 2fr deep pantry at stove wall. Add approximately 6ft of upper and lower cabinets on the stove wall. Increase the kitchen island to 9ft wide by 4ft wide (this includes the breakfas bar top) (Base cabinet is 9x3). Price is based on standard cabinetry and granite. PLEASE PROVIDE PRICING Alloc: H,HOM,2060.05,0015,3190,2 C/O #1 - (07/20/2022) Incorrect price	1.00 ls	0.0000	0.00			0.00
	KITCHEN LAYOUT CHANGE AND EXTENSION IN LEVEL 6		672.0000	672.00			672.00
0020	Revised - Line No. 0020	1.00 ls	672.0000	672.00			672.00

Sub-Total: 1,407.00
 Federal GST: 70.35
 HST - Ontario Portion: 112.56
Total: 1,589.91

 Advance Marble & Granite Ltd.
 _____ **Date:** _____

 Bellaire Properties Inc.
 _____ **Date:** _____

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Please submit copy of PO with invoice for payment.