



Pre-Delivery Inspection Form

Please list below any damaged, incomplete, or missing items and anything that is not in good operating condition. Also note any "substitutions" of items referred to in, or to be selected under, the Agreement of Purchase and Sale (APS), Please initial all changes and deletions, As a minimum check the following:

DAMAGED, INCOMPLETE OR MISSING • Windows, side lights and other glazing. Window and door screens • Windows, interior and exterior doors (including

- Bathtubs, sinks and toilets
- Bathroom accessories, it provided
- Mirrors, countertops and cabinetry
- · Flooring (hardwood, vinyl, ceramic tiles, carpeting)
- · Interior finishes and trim carpentry
- Furnace
- Hot water heater, if provided (not a rental)
- Exterior finishes, driveways, walkways, decks and landscaping are complete
- Windows, interior and exterior doors (including garage overhead door). Door locks
- Faucets: kitchen, bathroom, laundry room
- · Exhaust fans (kitchen, bathrooms), if provided
- · Electrical outlets and fixtures
- · Gas fireplaces, incl. circulation fans, if provided
- Heat Recovery Ventilation system, if provided
- Heating system
- · Hot water heater, if provided (not a rental)
- Air conditioning system, if provided and if conditions permit

Сошшен	ts	
Item#	Roum/Location	Description
	MASKA BORA	SCRATCH ON CLOSET DOOR ROUGH DRYWALL
		PATCH AT BASEBOARD CORNER TO
		RIGHT OF CLOSET, CAP BETHEEN TRUM
		AND WALL ON LEFT SIDE OF CLOSET DOOR
		PATUL UNDER WINDOW AT BASE BOARD
-2	LIVING ROOM	CORNER TO LEFT OF AIR RETURN ROUGH.
		TRIM ON RHS DE PATRO POOR, NAVL
		PROTRUDING AND CHIPPED TRUM
3	FRUNTI DUOR	GAP IN LETT SIDGE AIR COMING THROUGH.
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7	STOWAGE KIM	CRACKS IN FLOOR.
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or/Bull	der and Home Addr	ess Information:
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Date of	Possession: FE	B 16, 2010 Vendor/Builder Reference #34234
Date of l	Possession: FE	8 16, 20/0 Vendor/Builder Reference # 34234 5/4-6/9 Municipality (11/10) F RAR 0 #
		B 16, 2010 Vendor/Builder Reference # 34234 51/1-619 Municipality CTY OF BARRE
Project N	Name	
Project N Home/C	Name	17 CHELTENHAM RD #1
Project N Home/C	Name	
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Project N Home/C (please p	Name Svic Address print)	17 CHELTENHAM RD #1 BARRIE ONTARIO
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Project Mome/Contents of Post Project Monday Projec	Name	PARRIE ONTARIO PRATT HANSEN GROUP INC. Representative's Signature
Project Mome/Contents Please project of the Project	Name	PARRIE ONTARIO PRATT HANSEN GROUP INC. Representative's Signature d and signed by all persons who are shown as purchasers on the APS for the home, or
Project Monie/Control Project Monie/Control Project Monie	Name	PARRIE ONTARIO PRATT HANSEN GROUP INC. Representative's Signature d and signed by all persons who are shown as purchasers on the APS for the home, or ion contract (and/or by their designate*).
Project N Home/C (please p Vendor/I Represent section waters of	Name	PRATT HANSEN GROUP INC. Representative's Signature d and signed by all persons who are shown as purchasers on the APS for the home, or
Project Menne/Control Project Mendor/Dendor/	Name Name	PRATT HANSEN GROUP INC. Representative's Signature d and signed by all persons who are shown as purchasers on the APS for the home, or ion contract (and/or by their designate*). The and I agree that the descriptions of the items listed on this form are accurate.
Project Menne/Control Project Mendor/Dendor/	Name Name	PRATT HANSEN GROUP INC. Representative's Signature d and signed by all persons who are shown as purchasers on the APS for the home, or ion contract (and/or by their designate*). The and I agree that the descriptions of the items listed on this form are accurate.
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**Purchasers or owners who intend to designate someone to conduct the PDI in their place should ensure they provide written authority to the vendor/builder authorizing the designate to sign this form on their behalf.

THE COMPLETED PRE-DELIVERY INSPECTION FORM IS A FORMAL RECORD OF THE HOME'S CONDITION BEFORE THE PURCHASER TAKES POSSESSION. IT WILL BE USED AS A REFERENCE FOR FUTURE WARRANTY SERVICE REQUESTS.

Designate's* Name (please print)

15,2010

Date FCB 15 2010 Lot # 307 Unit Enrolment # 630972

Designate's* Signature