PDI Print Form ragerori



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Vendor/Builder # Purchaser Name :

Karlo Ano and Jamie Ano (647) 979-2835

Phone Bus:

Phone Res:

Closing Date: Inspector:

2014-02-12 Bruno Tidd

Enrollment # Legal Address: Project: Plan #:

DLS[19]
Pratt Hansen Group

Lot / Phase #: Municiaplity:

111 / ESV 2

Inspection Date: 10 Feb 2014

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 Sales (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
- · Bathtub sinks and toilets
- Bathroom accessories if provided
   Mirrors, counter tops and cabinetry
- Flooring (hardwood, vinyl, ceramic tiles, carpeting)
   Interior finished and trim carpentry

- Hot water heater, if provided (not rental)
  Exterior finished, driveways, walkways, decks and landscaping
- OPERATING CONDITION

  · Windows, interior and exterior doors including garage overhead doors, 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 rental)
  Air conditioning system, if provided and if conditions permit

GENERAL COMMENTS	e assessed because for example is dirty of maccessible.	
INSPECTION START TIME	INSPECTION STARTED AT 1:00 P.M.	 
NOTE:	TOUCH UPS REQUIRED THROUGH OUT AS INDICATED	 
NEW TELEPHONE NUMBER	** PURCHASER HAS A NEW PHONE NUMBER -647-979-2835	 
MAIN BATHROOM		
VANITY CABINETS	LEFT DOOR STICKS WHEN OPENING AND CLOSING.	 
FOYER/HALL		
CLOSET	TRIM NOT PAINTED AND DOOR CASING NOT PAINTED.	 
WINDOWS	SCREEN MISSING	 
NOTE:	FRONT DOOR RUBS ON TRIM AT BACK OF CLOSET WHEN OPENING.	 
FAMILY ROOM		
FLOORING	SCRATCHED LAMINATE ON LEFT SIDE OF FAMILY ROOM.	 
WALLS	PAINT JOB ON LEFT HAND WALL HAS FLAT AND SEMI GLOSS PATCHES. NEEDS TO BE RE PAINTED.	 
KITCHEN		
CABINETS	UPPER CABINET OVER STOVE IS TOO LARGE TO ACCOMMODATE OVER THE RANGE MICROWAVE. UPPER CABINET LEFT SIDE OF FRIDGE SCRATCHED. TOP DRAWER AND THIRD DRAWER SCRATCHED. CROWN MOULDING ON END PANEL	 
EXTERIOR		
NOTE:	PAINTING SODDING GRADING AND PAVED DRIVEWAY TO BE COMPLETED.	 

THE COMPLETED PRE-DELIVERY INSPECTION IS A FORMAL REPOSSESSION IT WILL BE USED AS A REFERENCE FOR FUTURE V* Purchasers or owners who intend to designate someone to conduct the authorizing the designate to sign this form on their behalf.  Builder Representative	WARRANTY REQUESTS	
Designate's Name(please print)  I the homeowner, confirm that all repair work listed has been completed	Designate's Signature	- 2 luc
	Purchaser	Date Date

31001-PDIF-01.01



## CERTIFICATE OF COMPLETION AND POSSESSION/ WARRANTY CERTIFICATE (FOR FREEHOLD AND CONDOMINIUM UNITS)

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THE VENDOR SHALL:
1. Complete this form with accurate information, including the final purchase price. (Failure to do so may have adverse consequences for the Vendor's licence); and
2. Deliver a signed copy of this document to the homeowner on or before the Pre-Delivery Inspection date.

HOME ENROLMENT NO.	
1896361	
COMMON ELEMENT. NO.	
(If applicable)	

					_			
VENDOR'S NAME:	H. HANSEN	DEVELOPMENT IN	C.		VENDOR R	EF. NO	40640	
VENDOR'S ADDRESS: 301 King St. BARRIE L4N6B5								
BUILDER'S NAME:(If					BUILDER R	EF. NO.:		$\exists$
different from Vendor)								
BUILDER'S ADDRESS:								
HOME ADDRESS (Pleas	e correct as requi	red):						
111	Sydenha	m Wells						
NUMBER	STREET NAME						CONDO SU	ITE NO.
BARRIE							(If applicabl	e)
CITY/TOWN		POSTAL CODE			*.		•	
LEGAL DESCRIPTION (F	Please correct as a	required):						
111	51M-983				E	Barrie, C	ity	
LOT OR UNIT/LEVEL	PLAN		BLOCK	CONCESSION	ı LC	CAL MUNICI	PALITY (Where building	j permit
					wa	is issued)		
FINAL PURCHASE PRIC						:		
(As per the purchase agn	eement or construc	ction contract and including	g upgrades and extras	, but excluding HST)	\$ 229,	394.00		
REGISTERED OWNER(S	(Please print nat	mes as shown or to be s	shown on the Transfe	r/Deed of Land):				
NAME(S): KARL						<u> </u>		
	· · · · · · · · · · · · · · · · · · ·							
				-				
EMAIL:			··-					
(Tanon and the Vencor will use If	his email address to send h	mportant information regarding the v	werranty.)					
<b>TARION</b>				* -		Tarion	Warranty Corp	
NATIONAL CANDINGS OF MANAGEMENT STATES							5160 Yonge Street, Toronto, ON	
Toronto, ON M2N 6L9  Warranty Information  Go to www.tarion.com to (i) access your Homeowner Information Package - a guide to your new home								
warranty; and (ii) register for MyHome - Tarion's online service for homeowners.								
VENDOR/BUILDER REF.	NO.: 4064	10		ENI	ROLMENT NO.	189	96361	
WARRANTY START DAT	E: Feb/	12/2014						7
HOME ADDRESS: 111 Sydenham Wells BARRIE								
VENDOR/BUILDER AFTE SALES SERVICE CONTA	I SER	VICE DEPT 70	5-721-9912					
The Vendor confirms that (i) the home is completed for possession; and (ii) the section 13 warranties under the Ontario New Home Warranties Plan Act apply to the home commencing on the Warranty Start Date (Date of Possession) noted above. Unfinished work and/or surface defects in work and materials (not accepted by the owner(s)) are set out in the accompanying Pre-Delivery Inspection Form.								
The Vendor hereby confirm	- I							
of the information noted in		AUTHORIZED SIGNATO	NDV					
İ		ACTIONIZED SIGNATO	rs i	DAT	I 🗠			1

DATE