

V/B REFERENCE NO.
34234
UNIT ENROLMENT NO.
1748714
C.E. NO. (IF APPLICABLE)
1684201

CERTIFICATE OF COMPLETION AND POSSESSION (FOR FREEHOLD AND CONDOMINIUM UNITS)
NOTE: ONLY TARION WARRANTY CORPORATION FORMS WILL BE ACCEPTED FOR PROCESSING.

VENDOR/BUILDER'S NAME:		Pratt Hansen Group Inc.			
		Pratt Homes			
VENDOR/BUILDER'S ADDRESS:		301 King St. BARRIE L4N6E3			
	NUMBER	STREET NAME	CITY/TOWN	POSTAL CODE	
BUILDER'S NAME (IF DIFFERENT THAN VENDOR)					
BUILDER'S ADDRESS					
	NUMBER	STREET NAME	CITY/TOWN	POSTAL CODE	

NEW HOME ADDRESS (PLEASE COMPLETE OR CORRECT AS REQUIRED)

41	FERNDALDE DR. S.	#409	BARRIE	
NUMBER	STREET NAME	(IF APPLICABLE CONDO UNIT NUMBER)	CITY/TOWN	POSTAL CODE

LEGAL DESCRIPTION (PLEASE COMPLETE OR CORRECT AS REQUIRED)

409	51M-959		
LOT	PLAN	BLOCK	CONCESSION
Barrie, City			
LOCAL MUNICIPALITY (WHERE BUILDING PERMIT WAS ISSUED)			

TYPE OF OWNERSHIP:	☒ FREEHOLD	☐ CONDOMINIUM
TYPE OF HOME:	☐ DETACHED ☐ SEMI-DETACHED ☐ TOWNHOUSE ☐ DUPLEX ☐ HI-RISE ☐ CONTRACT HOME ☒ Other	
	OTHER (SPECIFY):	
☐ SEWER SYSTEM	☐ PRIVATE SEWAGE DISPOSAL SYSTEM	☐ PURCHASER RESPONSIBLE FOR PRIVATE SEWAGE DISPOSAL SYSTEM

THIS SECTION MUST BE COMPLETED

DATE OF POSSESSION: (IF CONDOMINIUM USE DATE OF OCCUPANCY)	2012	06	15
	YEAR	MONTH	DAY
ACTUAL PURCHASE PRICE (INCLUDING UPGRADES AND EXTRAS, BUT EXCLUDING GST/HST)	\$ 187,253*		

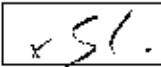
PLEASE PRINT NAME OF REGISTERED OWNER(S)

Berge	Coppola		
GIVEN NAME	SURNAME		
Emilia	Coppola		
GIVEN NAME	SURNAME		

NOTE TO BUYER: IF MONIES ARE ENCLOSED FOR ENROLMENT FEE ADJUSTMENT - PLEASE INDICATE ENROLMENT NUMBER ON THE BACK OF THE CHEQUE. DO NOT SEND CASH.

AFTER SALES SERVICE CONTACT:	Service Dept	301 King St	Barrie	721-9912
	NAME OF SERVICE CONTACT	ADDRESS		TELEPHONE

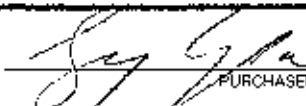
RECEIPT OF THE HOMEOWNER INFORMATION PACKAGE

	Homeowner - Initial to confirm receipt of the Homeowner Information Package.
	Designate - Initial to confirm receipt of the Homeowner Information Package.

PLEASE PRINT HOMEOWNER EMAIL ADDRESS

PURCHASER CERTIFICATE: The undersigned Purchaser(s) hereby certifies to Tarion Warranty Corporation that the Purchaser(s) has/have inspected the home described above and such home is substantially completed and is ready for possession by the Purchaser(s) on the date of possession indicated above notwithstanding completion by the Vendor/Builder of items listed on the Pre-Delivery Inspection Form. THIS IN NO WAY PRECLUDES THE DISCOVERY AND REPORTING OF FURTHER COMPLAINTS AND OR DEFECTS WITHIN THE SPECIFIED WARRANTY PERIODS.

THIS CERTIFICATE OF COMPLETION AND POSSESSION MUST BE COMPLETED BY BOTH PARTIES AND SUBMITTED TO TARION WARRANTY CORPORATION BY THE VENDOR WITHIN 15 DAYS OF THE DATE OF POSSESSION.

June 6/12	
DATE	PURCHASER
June 6/12	
DATE	PURCHASER
	VENDOR/BUILDER:

The Vendor/Builder warrants that the home is constructed in a workmanlike manner and free of defects in material. A COMPLAINT MUST BE REPORTED TO BOTH THE VENDOR AND TARION IN WRITING, BEFORE THE APPROPRIATE WARRANTY PERIOD EXPIRES.

For example, if your home's date of possession is November 8, 2009:

- The one year warranty begins on November 8, 2009 and ends on November 7, 2010
- The two year warranty begins on November 8, 2009 and ends on November 7, 2011
- The seven year Major Structural Defects (MSD) warranty begins on November 8, 2009 and remains in effect until and including November 7, 2016

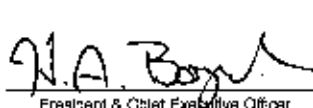
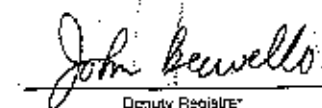
YOU SHOULD TAKE NOTE OF WHEN YOUR WARRANTY COVERAGES EXPIRE, BASED ON THE DATE OF POSSESSION SHOWN BELOW.

WARRANTY COMMENCES ON THE DATE OF POSSESSION:

(DATE OF OCCUPANCY, IF CONDOMINIUM) (VENDOR/BUILDER TO COMPLETE)

Warranty Certificate

(Ontario New Home Warranties Plan Act) by:

 
President & Chief Executive Officer Deputy Registrar

TARION WARRANTY CORPORATION (TARION) hereby confirms that the home identified above has the benefit of the warranties set forth in the Ontario New Home Warranties Plan Act, R.S.O. 1990, C.O.31.

IMPORTANT - HOMEOWNER : DETACH LABEL

AFFIX LABEL TO YOUR ELECTRICAL PANEL BOX TO INDICATE THAT THE WARRANTY IS IN EFFECT