

Zancor North Inc. Warranty Services Phone: (905) 738-7010

Fax: (905) 738-5948

Work Order

Closing Date: 17Sep20	17Sep20
Address:	Bianca Crescent
	Wasaga Beach
Location:	The Village of Trillium Forest - Phase: 3 - Lot: Block 144 Unit 6
Today's Date:	30Sep20
Contact(s):	KENT WOOTTON - Home: (647) 244-6498 Cell: (416) 624-4844
	JAQUELINE WOOTTON - Home: (647) 244-6498 Cell: (416) 624-4844
Email:	wootoniackie8@gmail.com

Attention: Telephone: Please Complete the following items: Company: 140298 Interval Type Wasaga Zancor Site Labour Site Super. (705) 428-6483 (705) 428-6484 Issue come off on the hinge door weather strip has Foyer- General- front Appt. Date/Time Notes <

Date Completed: Date Completed: side. Homeowner Signature:
The Homeowner acknowledges and accepts all work has been completed in a workman like manner. Trade &/or Service Tech.

Please schedule your Service Department to complete work on the above Lot. Should no appointment time or date appear (below) on this form, it is your responsibility to arrange and adhere to the appointment you have scheduled. Your service representative must have this form signed by homeowner on completion. Please fax the signed form to our office (905) 833-4367. Print Name: Signature:

Failure to comply with this request within 10 business days will give Zancor Homes (and it's group of companies) the right to carry out any and all repairs. All costs incurred will be applied to the Company listed above.

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Email: wootonjackie8@gmail.com

Company:
Attention:
Telephone: (705) 428-6483 (705) 428-6484 Wasaga Zancor Warranty Service

Please Complete the following items:

		3		
DAI	Туре	Issue	Appt. Date/Time	Notes
140723	30-Day	Basement- General- Furnace: The furnace	12Jan21 /day	8-9am arrival
		is making a knocking noise in the am and		REBOOK
		this needs to be		FOR NATHEN
		technician. (Early am		
		and late at night)		J. Comment
		ZANCOR REQUIRED		
		TO PATCH HOLES		
				1
		AREA		

Date Completed: N. S. 202/

omeowner Signature

has been completed in a workman like manner. The Homeowner acknowledges and accepts all work

Trade &/or Service Tech.

Date Completed: ,

Signature:

Print Name: NAMON SMAS

Please schedule your Service Department to complete work on the above Lot. Should no

Jan 27th 01 8AND \$ (ALZ#

page 1 / 2

## Covid-19 Assessment Form

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	EROUP OF COMPANIES

Company:
_Zancor Homes
D
ate:
NAC

Service Technician: NATIVAN SIMAS

					JAQUELINE	KENT	Homeowner Names (everyone present at time of appointment)
					٨	4	Have you been in contact with a person who has a potential or a confirmed case of the COVID-19 virus in the last 14 days?
					*.	×	Have you travelled or been in contact with someone who travelled outside of Canada within the past 14 days?
					۲.	7	Do you have or have you exhibited any Cold or Flu like symptoms within the past 7 days? If yes, please elaborate
					٨	7.	Do you have any other reason to believe that you may have been potentially exposed to the COVID-19 Virus?
							Notes