



NEWMAR WINDOW MFG. INC.
ALPA LUMBER GROUP

7630 AIRPORT ROAD, MISSISSAUGA, ON L4T 4G6
TEL (905) 672-1233 FAX (905) 672-1076

WO # W138403

Service Date: Aug 24, 2021

Priority: Normal Status: SCHEDULED

BUILDER

Customer: 610908 City: KING CITY Received: Jun 28, 2021
Name: ZANCOR MARKET COLLECTION Service Phone(s):
Service Fax: Site Phone: Time:
Site Fax: Lot#: BLK 2-11 Order: D365197-1
Phase:

RESIDENT INFORMATION

Home Owner Name: NELLA SPROVIERI Address:
Home Phone(s): Work Phone(s): 647-669-7291
Cell Phone(s): 416-414-6022 Email(s): nsprovieri@hotmail.com

LINKED ORDER INFORMATION

Customer: 610908 ZANCOR THE VILLAGE AT KINGS RI Lot #: BLK 2-11
Model: TH-06 Phase:

SERVICE INSTRUCTIONS

BEDROOM 3- GENERALREPLACE BOWED
WINDOW SCREEN--
REPLACEMENT WAS
LEFT OUTSIDE,
BLEW OVER AND
CREATED DENT

PARTS REQUIRED

LN	Item Description	Location	Specification	Size	Options	Qty
141	NEWMAR VINYL CASEMENT COMPLETED	B3	SCREENS-REPLA CEMENT-WINDO WS	19.0625 X 51.125		1
181	NEWMAR VINYL CASEMENT	MB	SCREENS-REPLA CEMENT-WINDO WS	19.0625 X 43.125		1

Problem Description: *Complete*

☐ Warranty

Material \$

Labour \$

☐ CHARGEABLES

Material \$ *MLC*

Labour \$

P.O.#:

Cause:

Solution: *Deep SEE OFF FRONT DOOR*

Date Completed: *Ag 24 / 2021*

Approved: *[Signature]*

Time:

Service Signature: *[Signature]*

ALEX



Zancor Homes (Block 81) Ltd.
Warranty Services
Phone: (905) 738-7010
Fax: (905) 738-5948

Work Order

Closing Date: 17May21

Address:

Location: The Village at Kings Ridge - Phase: 1 - Lot: Block 2 Unit 11

Today's Date: 21Jun21

Contact(s): Nella Sprovieri - Cell: (416) 414-6022
Giovanni Filippelli - Work: (647) 669-7291

Email: nsprovieri@hotmail.com

Company: Newmar

Attention: Alex

Telephone: (905) 672-1233

Fax: (905) 672-6350

Please Complete the following items:

DAI	Type	Issue		Appt. Date/Time	Notes
144778	Interval	Bedroom 3- General- REPLACE BOWED WINDOW SCREEN-- REPLACEMENT WAS LEFT OUTSIDE, BLEW OVER AND CREATED DENT			

Date Completed: _____

Homeowner Signature: _____

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

Date Completed: _____

Trade &/or Service Tech.

Signature: _____

Print Name: _____

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.

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.