

Phone: (705) 294-1740 **Warranty Services**

Fax: (705) 294-1741

Work Order

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Address:

Location: Belle Aire Shores - Phase: 1 - Lot: 99

Today's Date: 05Oct18

Contact(s): - ¿¿¿¿¿¿¿

Email:

Fax:	Telephone:	Attention:	Company:	
(905) 760-7838	(905) 760-7840		AV Classic	

Please Complete the following items:

Deficiency Number	су Туре	Issue		Appt. Date/Time	Notes
130773	PDI	Powder Room- Fill hole in grout behind toliet	2	Q	PROS

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

Date Completed: Print Name Signature: Trade &/or Service Tech.

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

applied to the Company listed above. 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

TUESDAY, CARTER



Work Order

Phone: (705) 294-1740 Warranty Services

Fax: (705) 294-1741

Today's Date: Location: Address: Closing Date: 06Feb19 Innsifil, Ontario L9S 0L6 Belle Aire Shores - Phase: 1 - Lot: 99 1559 Farrow Crescent 28Mar19

Attention: Email: Company: John CJ Caulking

Contact(s):

Fax: (905) 476-6030

Telephone:

DAI	Туре	Issue	Appt. Date/Time	Notes
131850	PDI	Exterior- General- Caulking not complete around front door		68/1

Date Completed:

Date Completed:

Homeowner Signature:

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

Trade &/or Service Tech.

Signature:

Print Name:

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



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Today's Date: Location: Address: Closing Date: Belle Aire Shores - Phase: 1 - Lot: 99 Innsifil, Ontario L9S 0L6 1559 Farrow Crescent 28Mar19

Email: Contact(s):

Attention:

Company:

Belle Aire Shores Const. Service

Telephone:

Fax:

Please Complete the following items:

DAI	Туре	Issue	Appt. Date/Time	Notes
131851	PDI	Exterior- General-	21Jan19	
		Crack on the	/day	
		basement window		
		vinyl trim		

Date Completed:



Homeowner Signature:

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

Date Completed:

Trade &/or Service Tech

Signature:

Print Name: SEFFE

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



Warranty Services
Phone: (705) 294-1740
Fax: (705) 294-1741

Work Order

293

COMPLETE BY JAMUSS 19

Fax: Today's Date: Location: Please Complete the following items: Telephone: Attention: Company: Email: Contact(s): Address: Closing Date: DAI Date Completed: Thu Date Completed: 131851 131849 130769 Type PDI PD PD! 1559 Farrow Crescent 28Mar19 Belle Aire Shores Const. Service 10Jan19 Belle Aire Shores - Phase: 1 - Lot: 99 Innsifil, Ontario L9S 0L6 hinges Main Hall- Generalat middle basement vinyl trim basement window Secure all interior door house window at back of Rip on window screen Issue Crack on the Exterior- General-Basement- General-Signature: has been completed in a workman like manner. Homeowner Signature: The Homeowner acknowledges and accepts all work Trade &/or Service Tech. Appt. Date/Time Notes Dove

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

Print Name:

MEMMEN

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Warranty Services Zancor Homes (Innisfil) Ltd.

Fax: (705) 294-1741 Phone: (705) 294-1740

Work Order

NATHAN

Closing Date:	28Mar19	
Address:	1559 Farrow Crescent Innsifil, Ontario L9S 0L6	
Location: Today's Date:	Belle Aire Shores - Phase: 1 - Lot: 99 04Feb19	MUSI DO HER I
Contact(s): Email:		
Company:	CJ Caulking	
Attention:	John	
Telephone:		

Please Complete the following items:

(905) 476-6030

	Date Completed: Fz8		Date Completed: FEB 7h		131850	DAI
	11		eted: FEB	10	PDI	Туре
	7m 2019		2019	Certiking not complete around from door	Exterior General?	Issue
Signature: M	Trade &/or Service Tech.	The Homeowner acki	Herneowner Signature:	NASH N	J ()	Appt. Date/Time
	Tech.	The Homeowner acknowledges and accepts all work has been completed in a workman like manner.	re:	TOTAL TOTAL		Notes

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

Print Name:

MATHIAN



Work Order

Warranty Services

Phone: (905) 738-7010

Fax: (905) 738-5948

Closing Date: 28Mar19

Address: 1559 Farrow Crescent Innsifil, Ontario L9S 0L6

Location: Belle Aire Shores - Phase: 1 - Lot: 99

Today's Date: 29Oct19

Contact(s): Frank Paglialunga -

Sandra Ublado - Home: (905) 471-8887 Cell: (416) 846-4455

Email: sanfran1559@gmail.com

Company: Belle Aires Shores Warranty Service Attention:
Telephone:

Please Complete the following items:

DAI	Туре	Issue	Appt. Date/Time	Notes
137223	Interval	Study- General- Door stopper came off	01Nov19 /pm	arrival between 1-4pm
	+	11/1/		

Date Completed: With

Homeowner Signature:

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

Trade &/or Service Tech

Date Completed:

Signature:

Print Name:

signed by homeowner on completion. Please fax the signed form to our office (905) 833-4367. 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 Please schedule your Service Department to complete work on the above Lot. Should no



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Fax: (905) 738-5948

Work Order

Closing Date:	28Mar19
Address:	1559 Farrow Crescent
	innsifil, Ontario L9S 0L6
Location:	Belle Aire Shores - Phase: 1 - Lot: 99
Today's Date:	29Jan20
Contact(s):	Frank Paglialunga -

Company: Icon Plumbing & Heating

Email:

sanfran1559@gmail.com

Sandra Ublado - Home: (905) 471-8887 Cell: (416) 846-4455

Telephone: Attention: (647) 526-0027

DAI	Type	DAI Type Issue		Appt.	Notes
137895	Interval	Basement- General- Inspect Sump pump		30Jan20 /am	Arrival time between 8-12pm
Date Completed:	eted:		Homeo	Homeowner Signature:	
			has bee	en completed	has been completed in a workman like manner.
Date Completed:	eted:		Trade 8	Trade &/or Service Tech.	Tech.
			Signature:	6	
			Print Na	ame:	Print Name: COMN STENSON
			•		0
	Final Line	Daniel D			

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. appointment time or date appear (below) on this form, it is your responsibility to arrange and rease sense you bely the repairment to complete work on the above tot, should no