

Zancor Homes Stayner Limited

**Warranty Services** 

Phone: (905) 738-7010

Fax: (905) 738-5948

Work Order

Closing Date:
Address: Today's Date: Location: 26Mar20 212 Lia Drive 08Mar21
Mark, Wayne Martin - Home: (416) 985-9897 Cell: (416) 829-4961
Stephanie, Angela Azzopardi -Villages in Stayner - Phase: 2 - Lot: 46 Stayner, Ontario

Company: Attention: Email: Stayner Zancor Warranty Service Site Super. stephanieazzop@hotmail.com spikeypipeline@hotmail.com

(705) 423-1136

Telephone:

Please Complete the following items:

DAI	Туре	Issue	Appt. Date/Time	Notes
142866	Interval	Exterior- General-	05Apr21	8am arrival
		garage ceiling leak at	/day	HETER 30 WATER TES.
		front right corner,		- المعرد دام
		please do a water test		100 100

Date Completed:

Homeowner 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:

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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.

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

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Company:Zancor Homes_	Covid-19 Assessment Form
Date: _	
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Service Technician:

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					SANTHU PEYNOLIC	MIKEN EINOLDS	Homeowner Names (everyone present at time of appointment)
					X	X	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?
			Boar was		X	K	Have you travelled or been in contact with someone who travelled outside of Canada within the past 14 days?
					X	X	Do you have or have you exhibited any Cold or Flu like symptoms within the past 7 days? If yes, please elaborate
					X	X	Do you have any other reason to believe that you may have been potentially exposed to the COVID-19 Virus?
							Notes
						X	X X