



BC

				1		
	BUILDER:	Zancor Homes	JOB SITE:	Belle A	ire Shores PH3	
1	Customer Code:		Job Number:	18648	Board Area:8	
	COMPLAINT DATE:	09/22/22	LOT:	31W		
	INSTALLER:		SCHEDULED D	ATE: 09/27/2	2	
	OWNER NAME:	Nicholas W	OWNER TEL:			
	OWNER ADDR:		REPAIR DURAT	TION: 0		
	ACCESS NOTES:	905-252-5072	REPAIR TYPE:	E-MAIL		
	REPAIRMAN:		BUILDER WO#			
	BUILDER PO#:	ТВА	PO Required:	NO	Inspection Reqd:	NO
			ORIGINAL WO	t: 709713		
	REPAIR DESC:	STRECH CARPET AT UPPER	LOFT BUBBLED			
	PROD INFO/NOTES: PROD ORDERED:	SUPPLIER:	PC)#:	DUE: / 0/	
	INSTALLER'S SIGNAT	rure:				

NOTE*** Please have this memo signed by the owner or site super upon completion.

WARNING

THINK SAFETY - ALWAYS WEAR YOUR SAFETY SHOES AND HARDHAT

















DATE: _





INSTALLER SIGNATURE

SUPER'S/OWNER'S SIGNATURE:

716077

Lot 3/w



X.

Zancor Homes (Innisfil) Ltd. Warranty Services

Phone: (905) 738-7010 Fax: (905) 738-5948 **Work Order**

ocation: oday's Date ontact(s): mail:	21Sep2 Nicholas Anne, C	ire Shores - Phase: 3 - Lo 2 s, W Johnson - Home: (90 Stewart - Home: (905) 25 06@gmail.com	5) 252-5072 -				
ompany:	0.53	Rugs Canada LTD.					
ttention: elephone: ax:	(905) 73						
		owing items:					
DAI	Туре	Issue		ppt. ate/Time	Notes		
150284	Interval	Loft Bedroom- General- Stretch carpet at upper loft bubbled					
Date Completed:			Homeowner Signature: The Homeowner acknowledges and accepts all wo has been completed in a workman like manner.				
Date Comp	leted:		Trade &/or Service Tech.				
			Signature:				
			Print Name:				

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.

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.