



NEWMAR WINDOW MFG. INC.  
ALPA LUMBER GROUP

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

WO # W191361  
Pack Slip:225353

Service Date: Aug 02, 2023

Priority: Normal Status: SCHEDULED

**BUILDER**

Customer: N000531 City: CALEDON Received: Jul 10, 2023  
Name: ZANCOR CALEDON CLUB Service Phone(s):  
Service Fax: Site Phone: Order: D386560-1  
Site Fax: Lot#: 40B Phase:

**RESIDENT INFORMATION**

Home Owner Name: LYDIA MPANJA NALUBEGA-KIMUMWE Address:  
Home Phone(s): Work Phone(s):  
Cell Phone(s): 416-9185233 Email(s): lkimumwe@yahoo.co.uk,  
Patrick.kimumwe@gmail.com

**LINKED ORDER INFORMATION (D386560-1)**

Customer: N000531 ZANCOR CALEDON CLUB Lot #: 40B  
Model: 30-05 CAPILANO (STND + OPT. GROUND) (BK) Phase:

**SERVICE INSTRUCTIONS**

ADJUST MASTER BEDROOM WINDOW - Done

Problem Description:

☐ Warranty

Material \$

Labour \$

☐ CHARGEABLES

Material \$

Labour \$

P.O.#:

Cause:

Solution: had to move bottom lock keep on sash to clear locking pin on frame.

Date Completed: Aug 2/2023

Approved:

Time:

Service Signature: 

MIKE(RENO)



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

## Work Order

**Closing Date:** 06Jul23

**Address:**

**Location:** Caledon Club - Phase: 1B - Lot: 40B

**Today's Date:** 07Jul23

**Contact(s):** Lydia Mpanja Nalubega-Kimumwe - Cell: (416) 918-5233 - (lkimumwe@yahoo.co.uk)

Patrick Kimumwe - (pakimu@yahoo.com)

Patrick Leon Nderedhe Kimumwe - (Patrick.kimumwe@gmail.com)

**Email:** lkimumwe@yahoo.co.uk

**Company:** Newmar

**Attention:** Alex

**Telephone:** (905) 672-1233

**Fax:** (905) 672-6350

**Please Complete the following items:**

DAI	Type	Issue		Appt. Date/Time	Notes
158825	Interval	Master Bedroom- General- adjust operating window			

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.**