



NEWMAR WINDOW MFG. INC.
ALPA LUMBER GROUP

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

WO # W191249

Pack Slip:238558

Service Date: Aug 29, 2023

Priority: Normal

Status: SCHEDULED

BUILDER

Customer: 611313

City: INNISFIL

Received: Jul 06, 2023

Name: ZANCOR BELLE AIRE SHORES

Service Phone(s):

Time: AM

Service Fax:

Site Phone:

Order: D390450-1

Site Fax:

Lot#: 215W

Phase: 3

RESIDENT INFORMATION

Home Owner Name: N/A

Address: KALPESHKUMAR, RATILAL GANDHI

Home Phone(s):

Work Phone(s):

Cell Phone(s): 647-907-5258, 416-276-5257

Email(s): kalpesh04@hotmail.com, rinal04@hotmail.com

LINKED ORDER INFORMATION (D390450-1)

Customer: 611313 ZANCOR BELLE AIRE SHORES

Lot #: 215W

Model: 50-03 CANAL/WH/LOT 215W

Phase: 3

SERVICE INSTRUCTIONS

** THIS IS A MUST DO ***

FOYER/HALL- FRONT DOORS-ADJUST LOCK AT LEFT FIXED DOOR, CAN'T OPEN

Problem Description:

☐ Warranty

☐ CHARGEABLES

Material \$

Material \$

Labour \$

Labour \$

P.O.#:

Cause:

Solution: ~~H/O HAS NO ISSUE WITH FRONT DOOR, IT'S INTERIOR~~
~~DOOR GOES TO BASEMENT~~ NOT NEWMAR ISSUE

Date Completed:

Aug 29/23

Approved:

Time:

Service Signature:

RICHARD



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

Work Order

Closing Date: 29Jun23

Address:

Location: Belle Aire Shores - Phase: 3 - Lot: 215W

Today's Date: 04Jul23

Contact(s): Kalpeshkumar, Ratilal Gandhi - Home: (416) 276-5257 - (kalpesh04@hotmail.com)
Rinal, Kalpeshku Gandhi - Home: (647) 907-5258 - (rinal04@hotmail.com)

Email: kalpesh04@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 |
|--------|------|---|--|--------------------|-------|
| 158292 | PDI | FOYER/HALL- FRONT DOORS~ADJUST LOCK AT LEFT FIXED DOOR, CAN'T OPEN | | | |
| 158305 | PDI | LIVING ROOM- WIND OWS~SETTLEMENT CRACK AT FIXED 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.