

NEWMAR WINDOW MFG. INC. ALPA LUMBER GROUP

7630 AIRPORT ROAD, MISSISSAUGA, ON L4T 4G6 TEL (905) 672-1233 FAX (905) 672-1076 WO # W189345 Pack Slip:235456

Service Date: Oct 11, 2023

| Priority: | Normal | | Status: | | SCHEDULED | | | | | |
|----------------------|--------------------------|-------------|-------------------|-------------|-----------|--------|----------|--------------------------|------------|-----|
| BUILDER | | | | | | | | | | |
| Customer: | 611313 | | City: | | INNISF | IL | | Received: | Jun 14, 20 | 23 |
| Name: | ZANCOR BELLE AIRE SHORES | | Service Phone(s): | | | | | Time: | 1ST CALL | |
| Service Fax: | | | Site Phone | э: | | | | Order: | D387531- | 1 |
| Site Fax: | | | Lot#: | | 89W | | | Phase: | 3 | |
| | NFORMATION | | | | | | | | | |
| | Name: ANDREW, J LICATA | PINA LICATA | A / | Address: | | 1315 S | TEVENS | ROAD | | |
| Home Phone(s): | | | | Nork Phoi | ne(s): | 416-80 | | | | |
| Cell Phone(s): | | | E | Email(s): | | pina@\ | vsibldm. | com | | |
| | DER INFORMATION (D387 | | | | | | | | | |
| | S11313 ZANCOR BELLE AIRE | SHORES | | | Lot # | | 9W | 1/1/03 | | |
| | 2-03 REGATTA/DW | | | | Phas | se: 3 | | 1649. | | |
| | STRUCTIONS | | | | | | | | | |
| "**LIFTER NEI | EDED AND LONG LADDER ** | * | | | | | | | | |
| HIGH TRANS | OM WINDOW IN THE STAIRC | ASE HAS CF | RACK ON (| GLASS | | | | | | |
| | | | | | | | | | | |
| ADD: | WINDOWS-CRACK AT UPPE | Ď LEGT ELVE | | A D O V E | TAIDO | | | | | |
| OTLIVITALL | WINDOWS-CRACK AT UPPE | K LEFT FIAD | ED GLASS | ABOVE S | TAIKS. | | | | | |
| BEDROOM #2 | - WINDOWS-ADJUST OPERA | ATING WIND | OW CANN | OT OPEN | lg. | | | | | |
| PARTS REQ | UIRED | | | | | | | | | |
| LN Item Descr | | Location | Specification | | Size | | Optio | | | Qty |
| 170 NEWMAR | R VINYL EXT SEG | OTB | GLASS (FIXED | ONLY - | 54 X 1 | 18 | | 1 DW/WH LOV | VE_ARG | 1 |
| | JOIN 2 PART | B2 | COMPLE | TE | 48 X 4 | 10 | | 2-PART DW 61316 FJ P2 | | 4 |
| | nsion and screen | DZ | COMPLE | | 40 A 4 | ю | DVV | 01310 FJ F2 | | 1 |
| COMPLE | TED | | | | | | | | | |
| | R VINYL CASEMENT | B2 | COMPLE | ETE | 24 X 4 | 18 | | T DW 61316 F | J CLR NVC | 1 |
| COMPLE | | | | | | | | /E_ARG | | |
| 202 NEWMAR COMPLE | R VINYL CASEMENT FIXED | B2 | COMPLE | TE | 24 X 4 | 18 | | 61316 FJ CLR | NVCF | 1 |
| | R VINYL EXT SEG | ОТВ | GLASS (| ONI V | 54 X 1 | 10 | | /E_ARG 1 DW/WH LOV | VE ADO | 1 |
| O TO TALL VIVIVA | WINTE EXT SEG | OID | FIXED | JINLI - | J4 /\ | 10 | | 2-PART DW | VE_ARG | 1 |
| | | | | | | | | | | |
| Problem Descr | ription: | | | | | | | | | |
| | | | | | | | | | | |
| Warranty | CHARGEA | | | | EABLE | S | | | | |
| Material \$ | | | | Material \$ | 14 | .) | | | | |
| _abour\$ | | | | abour \$ | 1 | 0 | 6 | | | |
| 2 | | | F | P.O.#: | | | | | | |
| Cause: | | | | | | | | | | |
| | | | | | | | | | | |
| Solution: | | | | | | | | | | |
| | | | | | | | | | | |

| 70.5 | |
|-------------------|-------------------------|
| Date Completed: _ | 10/4/23 Approved: |
| Time: _ | Service Signature: KYLE |
| | |
| | 11/2 |
| | 710 H/O |
| | LOCK BOX |
| | |

HOMES

ANCOR Zancor Homes (Innisfil) Ltd. Warranty Services

Phone: (905) 738-7010

Fax: (905) 738-5948

Work Order

| ETHICAST THE PARTY OF THE PARTY | | | - |
|--|-----------------------|--------------------------|----|
| F., 3 S14044 Jun | PROPERTY AND ADDRESS. | THE RESERVE AND ADDRESS. | a. |
| 101145-114 | 6 Date: | 29 Inn | 50 |
| | | | |

Address:

Location:

Belle Aire Shores - Phase: 3 - Lot: 89W

Today's Date:

26Jun23

Contact(s): Email:

Company:

Newmar

Attention:

Alex

Telephone:

(905) 672-1233

Fax:

(905) 672-6350

Please Complete the following Items:

| DAI | Type | Issue | Appt. Date/Time | Notes |
|--------|------|---|-----------------|----------------|
| 158353 | PDI | FOYER/HALL- WINDOWS~CRACK AT UPPER LEFT FIXED GLASS ABOVE STAIRS. | 9/14/23 | glass Broke at |
| 158357 | PDI | BEDROOM #2- WINDOWS~ADJUST OPERATING WINDOW CANNOT OPEN. | 9/19/03 | a |

Date Completed: 4/16/25

Homeowner Signature: X

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

Trade &/or Service Tech.

Signature:

Print Name: Tyle

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.

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