

|                                                                                                                                                                                                                    |                                                                                   |                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Enrollment:</b><br><b>Purchaser Name:</b> Fawad Ali<br>Sofia Mian<br><b>Phone Res:</b><br><b>Phone Bus:</b> (647) 778-6426<br><b>Closing Date:</b> December 07, 2023<br><b>Inspector:</b> Alexandria Damianidis |  | <b>Vendor / Builder:</b><br><b>Project:</b> Zancor Homes (Caledon) Ltd.<br><b>Lot / Phase:</b> 128B / 1B<br><b>Plan:</b><br><b>Address:</b> 16 Ida Terrace<br><b>Municipality:</b><br><b>Inspection Date:</b> December 01, 2023 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Please list below any damaged, incomplete, or missing items and anything that is not in good operating condition. Also note any (substitutions) of items referred to in, or to be selected under, the Agreement of Purchase and Sales (APS). Please initial all changes and deletions. As a minimum, check the following:

**DAMAGED, INCOMPLETE OR MISSING**

- Windows, side lights and other glazing. Window and door screens
- Bathtub sinks and toilets
- Bathroom accessories if provided
- Mirrors, counter tops and cabinetry
- Flooring (hardwood, vinyl, ceramic tiles, carpeting)
- Interior finished and trim carpentry
- Furnace
- Hot water heater, if provided (not rental)
- Exterior finished, driveways, walkways, decks and landscaping

**OPERATING CONDITION**

- Windows, interior and exterior doors. Door locks
- Faucets: Kitchen, bathroom, laundry room
- Exhaust fans (kitchen, bathrooms) if provided
- Electrical outlets and fixtures
- Gas fireplaces, incl. circulation fans, if provided
- Heat Recovery Ventilation system, if provided
- Heating system
- Hot water heater, if provided (not rental)
- Air conditioning system, if provided and if conditions permit

|                            |                                                                                           |       |       |
|----------------------------|-------------------------------------------------------------------------------------------|-------|-------|
| <b>MASTER ENSUITE BATH</b> |                                                                                           |       |       |
| -                          | 6                                                                                         |       |       |
| FLOORING                   | REMOVE LINE IN TILE INFRONT OF LEFT SINK                                                  | _____ | _____ |
|                            | OVERCUT A TILE BELOW TOLIET                                                               | _____ | _____ |
|                            | CUT TILE BEHIND TUB FOR REGISTER NOT FITTING                                              | _____ | _____ |
|                            | CARPET SHIM REQUIRED AT ENTRANCE TO MASTER ENSUITE AND 2ND FLOOR ENTRY WAYS.              | _____ | _____ |
| <b>MASTER BEDROOM</b>      |                                                                                           |       |       |
| WALLS                      | CORNER BEAD VISIBLE RIGHT SIDE AT ENTRANCE TO CLOSET                                      | _____ | _____ |
| <b>LAUNDRY ROOM</b>        |                                                                                           |       |       |
| CABINETS                   | MISSING CUT OUT AT GABLE FOR WATER LINES                                                  | _____ | _____ |
|                            | UPPER EDGE TAPE AT CABINET ABOVE SINK PEELING                                             | _____ | _____ |
| <b>SHARED ENSUITE</b>      |                                                                                           |       |       |
| VANITY CABINETS            | DENT ON BOTTOM LEFT CABINET BELOW RIGHT SINK.                                             | _____ | _____ |
|                            | REPLACE CURTAIN ROD DENTED.                                                               | _____ | _____ |
| <b>BEDROOM #4</b>          |                                                                                           |       |       |
| WALLS                      | CRACKS AT RIGHT AND LEFT SIDE OF UPPER PEAK AT WINDOW.                                    | _____ | _____ |
| <b>BEDROOM 4 ENSUITE</b>   |                                                                                           |       |       |
| FLOORING                   | CHIPPED WALL TILE AT TUB FACUET                                                           | _____ | _____ |
|                            | INSPECT 1ST TILE AT ENTRANCE TO ENSUITE LEFT SIDE FOR CHIP OR GROUT                       | _____ | _____ |
| <b>UPPER HALL</b>          |                                                                                           |       |       |
| WALLS                      | SETTLEMENT CRACK/SLOPPY EDGING ABOVE STAIRS AT LAUNDRY WALL AND WALL ACROSS /INSIDE LINEN | _____ | _____ |

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Page 2 of 3

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|                    |                                                                                |       |       |
|--------------------|--------------------------------------------------------------------------------|-------|-------|
| <b>FOYER/HALL</b>  |                                                                                |       |       |
| STAIRS             | DAMAGED INSIDE STRINGER BY 2ND TREAD FROM LANDING TO 2ND FLOOR                 | _____ | _____ |
|                    | DENT ON 4 TREAD BY PICKET AT STAIRS TO 2ND AND 7/9 RISER AT OUTSIDE STRINGER   | _____ | _____ |
|                    | CHIPPED                                                                        | _____ | _____ |
|                    | SECURE TRIM BELOW STRINGER AT STAIRS TO 2ND FLOOR CAN SEE FROM MUDROOM         | _____ | _____ |
| FLOORING           | MISSING GROUT AT TILE BY SMALL FLIGHT OF STAIRS FROM MUDROOM TO MAIN FLOOR 1ST | _____ | _____ |
|                    | TILE                                                                           | _____ | _____ |
| WALLS              | GARAGE 1 COAT OF PAINT NOT COMPLETED.                                          | _____ | _____ |
| FRONT DOORS        | DENT ON LEFT FIXED DOOR BELOW GLASS                                            | _____ | _____ |
| <b>BASEMENT</b>    |                                                                                |       |       |
| FURNACE            | FURNACE FILTER COVER MISSING.                                                  | _____ | _____ |
|                    | INSPECT FURNACE COVER DOOR NOT INSTALLED CORRECT SECURE SCREW                  | _____ | _____ |
| <b>KITCHEN</b>     |                                                                                |       |       |
| CABINETS           | SMALL DENT AT BACK PANEL AT UPPER CABINET RIGHT OF HOODFAN.                    | _____ | _____ |
|                    | CHIP ON UPPER RIGHT CABINET LEFT OF HOODFAN.                                   | _____ | _____ |
|                    | CHIP AT RIGHT FRIDGE GABLE.                                                    | _____ | _____ |
|                    | GAPS AT CROWN MOULDING THROUGHOUT AT SEAMS                                     | _____ | _____ |
| COUNTERTOPS        | COOKTOP CUT OUT SHOULD BE 36" IT IS 34"                                        | _____ | _____ |
| WINDOWS            | MISSING SCREEN DOOR AT SLIDING DOOR.                                           | _____ | _____ |
| <b>LIVING ROOM</b> |                                                                                |       |       |
| FLOORING           | CHIP AT 20TH PLANK FROM TILE IN KITCHEN                                        | _____ | _____ |
| NOTE:              | SECURE VENT BELOW WINDOW                                                       | _____ | _____ |
| <b>POWDER ROOM</b> |                                                                                |       |       |
| NOTE:              | INSPECT CABINET BELOW SINK- HOMEOWNER REQUESTING NOT TO HAVE DOUBLE GABLE.     | _____ | _____ |
|                    | CAN SEE GLUE AT EDGES.                                                         | _____ | _____ |
| <b>EXTERIOR</b>    |                                                                                |       |       |
| NOTE:              | DENT ON SOFFIT LEFT SIDE OF FRONT DOOR.                                        | _____ | _____ |
|                    | REMOVE PAINT OFF TRIM AT FRONT DOOR.                                           | _____ | _____ |

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Page 3 of 3

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THE COMPLETED PRE-DELIVERY INSPECTION IS A FORMAL RECORD OF THE HOME'S CONDITION BEFORE THE PURCHASER TAKES POSSESSION IT WILL BE USED AS A REFERENCE FOR FUTURE WARRANTY REQUESTS.

*\* Purchasers or owners who intend to designate someone to conduct the PDI in their place should ensure they provide written authority to the vendor/builder authorizing the designate to sign this form on their behalf.*

I have inspected my new home and I agree that the description of the items listed on this form are accurate.

Fawad Ali

Purchaser's Name (print)

A handwritten signature in black ink, appearing to be "Fawad Ali".

Purchaser's Signature

Sofia Mian

Purchaser's Name (print)

Purchaser's Signature

A handwritten signature in black ink, appearing to be "Sofia Mian".

Designate's Name (print)

Designate's Signature

Alexandria Damianidis

Inspector's Name (print)

Inspector's Signature

Date (YYYY/MM/DD)

2023/12/01

December 01, 2023