

Enrollment:
Purchaser Name: Sejal Madha-Khatri

Phone Res:
Phone Bus: (647) 262-2705
Closing Date: January 18, 2024

Inspector: Alexandria Damianidis



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Vendor / Builder:
Project: Zancor Homes (Caledon) Ltd.
Lot / Phase: Block 192 - Unit 3 / 1B
Plan:
Address: 67 Camino Real Drive
Municipality:
Inspection Date: January 16, 2024

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

KITCHEN

WINDOWS	SCREEN DOOR NOT INSTALLED AT SLIDING DOOR	_____	_____
	DENT ON TRACK BELOW SLIDING DOOR AND DOOR NOT LOCKING	_____	_____
COUNTERTOPS	INSPECT LEFT WATER FALL EDGE AT FRIDGE SIDE - GAP AT FLOOR CAN SEE SHIM AND SEAM	_____	_____
	AT SINK ABOVE CABINET DULL/CHIPPED	_____	_____
SINK/FAUCET/PLUMBING	UPGRADED FACUET NOT INSTALLED AS PER EXTRAS- SHOULD BE MATTE BLACK- ALIGN	_____	_____
	MATTE BLACK 5923	_____	_____
	REMOVE PAINT FROM INSIDE SINK LEFT SIDE AND INSPECT SINK AS PER H.O NO STRIAGHT	_____	_____
CABINETS	UPPER GABLE LEFT OF SLIDING DOOR TO BE CHANGED NAIL /CHIP MARKS.	_____	_____
	SHELF NOT INSTALLED LEFT OF BANK OF DRAWERS.	_____	_____
	REMOVED BLACK MARKS FROM LOWER RIGHT CABINET RIGHT OF FRIDGE	_____	_____
	SMALL DENT ON RIGHT GABLE RIGHT OF FRIDGE	_____	_____
	INSPECT TOPS OF ISLAND CABINET SCRAPPING AT EDGE LOWER	_____	_____
	CHIP AT BACK GABLE AT FLOOR LINE	_____	_____
	ADJUST ISLAND NOT STRAIGHT.	_____	_____
ELECTRICAL/LIGHTING	ELECTRICAL OUTLET AT ISLAND SHOULD BE BLACK AND NOT SECURED AT ISLAND	_____	_____

MASTER BEDROOM

WINDOWS	REPLACE ASTRICAL AT BALCONY DOOR AND FIXED DOOR BOWED AT TOP RIGHT CORNER	_____	_____
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UPPER HALL

WALLS	DENT IN STIPPLE LEFT OF FIXTURE	_____	_____
RAILING	CHIP AT NEWEL AT 3RD FLOOR. AND RAILING BELOW	_____	_____

BEDROOM #2

WINDOWS	REPLACE SCREEN TORN.	_____	_____
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FOYER/HALL			
STAIRS	OVER CUT AT NOSING AND LANDING TO 3RD FLOOR	_____	_____
	STAIN REQUIRED AT 3RD TREAD AT STAIRS TO 2ND FLOOR FROM LANDING AND RAILING ABOVE	_____	_____
	CHIP AT RAILING AT INSIDE BY NEWEL POST	_____	_____
	CRACKED TREAD 4TH TREAD STAIRS TO 3RD FLOOR	_____	_____
	CRACK ON RIGHT RAILING AND CHIP AT STAIRS FROM 2ND TO LANDING TO 3RD FLOOR	_____	_____
	CHIP AT 6 TREAD BY RAILING EDGE FACING LIVING	_____	_____
	CRACK TRIM BELOW NOSING AT LANDING TO THIRD-FLOOR LEFT SIDE	_____	_____
	DENT ON NEWELL POST AT LANDING FROM FIRST FLOOR TO SECOND FLOOR. AND CHIP AT EDGE OF RAILING LEFT SIDE AT STAIRS FROM MAIN FLOOR TO FIRST LANDING TO SECOND FLOOR.	_____	_____
	SECURE, TRIM, RIGHT AND LEFT SIDE AT MAIN FLOOR STAIRS TO LANDING TO SECOND FLOOR	_____	_____
	CHIP AT 3,4 TREAD AT STAIRS FROM MAIN TO 2ND FLOOR	_____	_____
	STAIN REQUIRED AT NOSING AT FRONT DOOR	_____	_____
WALLS	SEAM VISIBLE INSIDE CLOSET	_____	_____
FRONT DOORS	LARGE DENT ON RIGHT AND LEFT DOOR INSIDE	_____	_____
FLOORING	CRACK AT 17TH HARDWOOD PLANK FROM LEFT WALL OF STAIRS AND RAISED HARDWOOD PLANK AT EIGHT PLANK FROM LEFT WINDOW	_____	_____
NOTE:	REPLACEMENT DOOR BOWED AT TOP	_____	_____
LIVING ROOM			
FLOORING	INSPECT RAISED PLANK LEFT OF OUTSIDE STRINGER AT STAIRS FROM 2ND TO 3RD FLOOR FOURTH PLANE FROM NEWELL POST.	_____	_____
POWDER ROOM			
NOTE:	SCRATCH ON COUNTERTOP RIGHT OF SINK	_____	_____
WALLS	OVERCUT AT CEILING FAN AT POWDER ROOM AT FIRST FLOOR	_____	_____
LIBRARY/DEN			
WALLS	MISSING GLASS INSERT AT HOBBY ROOM	_____	_____

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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.

Sejal Madha-Khatri

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

Purchaser's Name (print)

Purchaser's Signature

Purchaser's Name (print)

Purchaser's Signature

Alexandria Damianidis

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

Designate's Name (print)

Designate's Signature

Inspector's Name (print)

Inspector's Signature

Date (YYYY/MM/DD)

2024/01/16

January 16, 2024