

NEWMAR WINDOW MFG. INC. ALPA LUMBER GROUP

8 EDVAC DRIVE, BRAMPTON ON L6S 5P2 TEL (905) 672-1233 FAX (905) 672-1076 WO # W21006 Pack Slip:5968

Service Date: Feb 07, 2024

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	Normal		Status:	COUEDIN			
BUILDER	, years and the state of the st		otatus.	SCHEDULED			***************************************
Customer: {	3030030	······································	City .	······································	~~~		***************************************
Name: Z	ZANCOR THE BRANCH CO	ONDOS	City:	OAKVILLE	Receiv	ved: Dec 13	3, 2023
Service Fax:		011200	Service Phone(s):		Time:		
Site Fax:			Site Phone:	(416) 566-206	6 Order:	H8011	68-1
RESIDENT IN	FORMATION		Lot#:	7TH FLOOR	Phase		
Home Owner Na						***************************************	***************************************
Home Phone(s):			Address:			10,300000000000000000000000000000000000	X10X 074 074 0 1000 0 1000 0 1000 0 1
Cell Phone(s):	905-341-2488		Work Pho				
	ER INFORMATION (H80		Email(s):	LARA	GUAGUAGUA@G	MAIL.COM	
Customer: 803	20020 ZANCOD TUE DE	1168-1)	100,1		**************************************	***************************************	WWW.0000000000000000000000000000000000
	30030 ZANCOR THE BRAN H FLOOR			House Model:	7TH FLOOR		**************************************
and the second of the second o		Phase:		Elevation:	2001		
SERVICE INST				anno e mente e din na e e e e e e e e e e e e e e e e e e		Established the second of the	******************
SUPPLY AND IN	STALL					***************************************	***************************************
UNIT 726 - MISS	ING PATIO DOOR SCREE	N 05 4/2 4/2					
		:N - 35 1/2 X 84	ŀ H/L				
ADDED ON JA	N 9TH 2024						
INVESTIGATE AN	ND CORRECT						
DAI #170445 DD				, ,			
DARTO DE 0111	OI - BEDROOM 2 - WINDON	W CRANK LOC	SE, TIGHTEN (C	smalet			
TAKTS REQUIR	KED						II SANSANIA WALLA ARABATA
LN Item Descriptio		Location	Specification	Size	Options		~00000000000000000000000000000000000000
114 PURCHASE	J PATIO DOOR	WBCH7-WS	SCREENS	35 7/16 X 84	•	/ LIOEX/ 100-	Qty
Address Labels		11		1/16	MEDIUM GRAY LEFT	7 UCFX11030	1
BCH-7F-19-5*	2220	010					
	comp	THE STATE OF THE S	***************************************				
Problem Description	n.					~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	***************************************
	11.						
Warranty			p			***************************************	***************************************
Material \$			CHARGE	EABLES			
Labour \$	•		Material \$				
	•		Labour \$	-			
Cause:			P.O.#:				
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					***************************************	10000000000000000000000000000000000000	MARKET CONTROL OF THE PARTY OF
Solution:							
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						000000000000000000000000000000000000000	200000000000000000000000000000000000000

Date Completed:	07/02/24						······································
····p·otou.	(1-0)		Approve	d:			

Time:	Service Signature: _	Migrel	- (8 SC
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08Jan24

Closing Date:

Address:

Zancor Oakville Ltd. Warranty Services Phone: (905) 738-7010

Fax: (905) 738-5948

2450 Old Bronte Road, Suite 726

Location: Today's Date: Contact(s): Email:	Oakville, Ontario The Branch Condos - Phase: 1 - Lot: 726 08Jan24 Ruhan XIE - Cell: (905) 341-2488 - (laraguaguagua@gmail.com) laraguaguagua@gmail.com							
Company: Attention: Felephone: Fax:	NEWN	IAR-The Branch				I		
Please Compl	ete the fo	llowing items:						
DAI	Туре	Issue		Appt. Date/Time	Notes			
170415	PDI	Bedroom 2- General- window crank loose, tighten						
Date Completed:			Homeowner Signature: The Homeowner acknowledges and accepts all work has been completed in a workman like manner.					
Date Completed:			Trade &/or Service Fech. Signature:					
			Print Na	ame:				
Please schappointme	nedule yo nt time or	ur Service Department to date appear (below) on the	complete	work on the it is your resp	above Lot. Should no onsibility to arrange and			

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.

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.