Enrollment:

Purchaser Name: Kuljit Mann

Phone Res:

Phone Bus: (416) 937-1515

Closing Date: April 11, 2024 Inspector: Gisella Fiore

HOMES

Vendor / Builder:

Project: Zancor Homes (Wasaga River) Ltd.

Lot / Phase: 256 / 1

Plan:

Address: 159 Rosanne Circle

Municiaplity:

Inspection Date: March 21, 2024

Page 1 of 2 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

UPPER HALL			
NOTE:	RAISED PLANK AT 2ND LANDING TO 2ND FLOOR		
KITCHEN			
FLOORING	CHIPPED TILE 7TH FROM SLIDING DOOR		
EXTERIOR			
NOTE:	REMOVE PLASTER OFF FRONT PORCH.		

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Page 2 of 2

A REFERENCE FOR FUTURE WARF	RANTY REQUESTS. o designate someone to conduct the PDI in the	E HOME'S CONDITION BEFORE THE PURCHASS neir place should ensure they provide written auth	
I have inspected my new home and	I agree that the description of the items listed	on this form are accurate.	
Kuljit Mann	1		
Purchaser's Name (print)	Purchaser's Signature	Purchaser's Name (print)	Purchaser's Signature
		Gisella Fiore	Sh
- -			
Designate's Name (print)	Designate's Signature	Inspector's Name (print)	Inspector's Signature
Date (YYYY/MM/DD)	2024/03/21	March 21, 2024	