Enrollment: Purchaser Name: ?????

Phone Res:

HOMES

Vendor / Builder:

Project: Zancor Oakville Ltd.

Lot / Phase: 715 / 1

Plan:

Address: 2450 Old Bronte Road, Suite 715

Municiaplity:

Inspection Date: May 09, 2024

Phone Bus: Closing Date: December 32, 1969

Inspector: Gisella Fiore

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

KITCHEN				
CABINETS	ADJUST UPPER CABINET ABOVE MICROWAVE.			
NOTE:	DISHWASHER NOT CONNECTED			
LIVING ROOM				
NOTE:	ADJUST SLIDING DOOR NOT LOCKING AND DOOR			
MASTER ENSUITE BATH				
NOTE:	TRIM SHORT BEHIND TOILET.			

Enrollment:
Purchaser Name: ?????

Phone Res: Phone Bus:

Date (YYYY/MM/DD)

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Page 2 of 2

Vendor / Builder:

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A REFERENCE FOR FUTURE WARR	ANTY REQUESTS. designate someone to conduct the PDI in the	E HOME'S CONDITION BEFORE THE PURCHASE eir place should ensure they provide written author			
I have inspected my new home and I agree that the description of the items listed on this form are accurate.					
?????	J Stritten				
Purchaser's Name (print)	Purchaser's Signature	Purchaser's Name (print)	Purchaser's Signature		
		Gisella Fiore	HL.		
Designate's Name (print)	Designate's Signature	Inspector's Name (print)	Inspector's Signature		

May 09, 2024

2024/05/09