

## NEWMAR WINDOW MFG. INC. ALPA LUMBER GROUP

7630 AIRPORT ROAD, MISSISSAUGA, ON L4T 4G6 TEL (905) 672-1233 FAX (905) 672-1076 WO # W222934 Pack Slip:248733

Service Date: Aug 13, 2024

| Priority:            | Normal                              | Status:    |             | SCHED    | ULE         | D         |            |              |   |
|----------------------|-------------------------------------|------------|-------------|----------|-------------|-----------|------------|--------------|---|
| BUILDER              |                                     |            |             |          |             |           |            |              |   |
| Customer:            | N000531                             | City:      |             | CALED    | ON          |           | Received:  | Jul 23, 2024 |   |
| Name:                | ZANCOR CALEDON CLUB                 | Service I  | Phone(s):   |          |             |           | Time:      |              |   |
| Service Fax:         |                                     | Site Pho   | ne:         |          |             |           | Order:     | D394789-1    |   |
| Site Fax:            |                                     | Lot#:      |             | 144B     |             |           | Phase:     | 1B           |   |
| RESIDENT             | INFORMATION                         |            |             |          |             |           |            |              |   |
| Home Owner           | Name: RAVINDRA YADAORAO PANDE       | &MANJIR    | Address:    |          | 9 ID<br>4M2 |           | E CALEDON, | ONTARIO L70  | ) |
| Home Phone           | (s): 416-473-2554, 416-526-2374     |            | Work Pho    | ne(s):   |             |           |            |              |   |
| Cell Phone(s)        | ):                                  |            | Email(s):   |          | ravi        | _pande@ho | tmail.com  |              |   |
| LINKED OR            | DER INFORMATION (D394789-1)         |            |             |          |             |           |            |              |   |
| Customer:            | N000531 ZANCOR CALEDON CLUB         |            |             | Lot #    | ŧ:          | 144B      |            |              |   |
| Model:               | 30-05 CAPILANO (STD+OPT, GRD)/LOT 1 | 44B (BLK   | )           | Phas     | se:         | 1B        |            |              |   |
| SERVICE IN           | ISTRUCTIONS                         |            |             |          |             |           |            |              |   |
| *** PLS CALL         | .RAVI 1 HOUR PRIOR TO ARRIVAL @ 416 | 6-526-2374 | 1 ***       |          |             | $\circ$   |            |              |   |
|                      | _                                   |            |             |          |             | (1)       |            | /            |   |
| 177902 1779          | 03 EXTERIOR- GENERAL- ADJUST MAN I  | DOOR WA    | TER IS CO   | OMING II | NSID        | E ///     | W//        |              |   |
|                      |                                     |            |             |          |             | yU        |            |              |   |
| Problem Desc         | cription:                           |            |             |          |             |           |            |              |   |
| Warranty             |                                     |            | CHAR        | GEABLE   | · C         |           |            |              |   |
| Warranty Material \$ |                                     |            | Material \$ |          | /1          | C         |            |              |   |
| Labour \$            | <del></del>                         |            | Labour \$   | -/->     | 41          |           |            |              |   |
| Laboul y             | <del>9</del>                        |            | P.O.#:      | 0        | _           |           |            |              |   |
| Cause:               |                                     |            | r.O.#.      |          |             |           |            |              |   |
| Cause.               |                                     |            | ***         |          |             |           |            |              |   |
|                      |                                     |            |             |          |             |           |            |              |   |
| Solution:            |                                     |            |             |          |             |           |            |              |   |
|                      | g)                                  |            |             |          |             |           |            |              |   |
|                      | 0/1-/011                            |            |             |          |             |           |            |              |   |
| D-4- 0               | 8/13/24                             |            |             | 157      |             |           |            |              |   |
| Date Comp            | leted:                              |            | Appro       | ovea:    |             | 1         | -//        |              | - |
|                      | 1.                                  |            |             |          |             | // -      | //1        | 1/           |   |
|                      | Time: 45 min                        | 0-         | - 4 01      |          | K           | 1         | X UV       |              |   |
|                      | Time.                               | Se         | rvice Signa | ature:   | _           | // k      | YLE        |              |   |
|                      |                                     |            |             |          |             |           |            |              |   |
|                      |                                     | - 4        | 3           |          |             | //        |            |              |   |
|                      |                                     |            | 13          | 511      | V           |           |            |              | - |
|                      |                                     | _          | -1          |          |             |           |            |              |   |
|                      |                                     |            |             |          |             |           |            |              |   |
|                      |                                     | 1          | 7           |          |             |           |            |              |   |
|                      | OK.                                 | _          | 1           |          |             |           |            |              |   |
|                      |                                     | 2-         |             |          |             |           |            |              |   |



Phone: (905) 738-7010 Fax: (905) 738-5948

**Work Order** 

| Closii | กต Da | te: 1 | l8Sep: | 23 |
|--------|-------|-------|--------|----|

Address:

9 Ida Terrace

Caledon, Ontario L7C 4M2

Location:

Caledon Club - Phase: 1B - Lot: 144B

Today's Date:

23Jul24

Contact(s):

Ravindra Yadaorao Pande - Home: (416) 526-2374 - (ravi\_pande@hotmail.com)

Manjiri Pande - Home: (416) 473-2554

Email:

ravi\_pande@hotmail.com

Company:

Newmar

Attention:

Alex

Telephone:

(905) 672-1233

Fax:

(905) 672-6350

Please Complete the following items:

| DAI    | Туре     | Issue  | Appt.<br>Date/Time | Notes  |
|--------|----------|--|--------------------|--------|
| 177902 | Interval | Exterior- General-<br>ADJUST MAN DOOR<br>WATER IS COMING<br>INSIDE | 49                 | Durce, |
| 177903 | Interval | Exterior- General-<br>ADJUST MAN DOOR<br>WATER IS COMING<br>INSIDE |                    | Rome.  |

|      |            | 81 | 1 | 4 |
|------|------------|----|---|---|
| Date | Completed: | 0  | 1 | / |

Homeowner Signature:

The Homeowner acknowledges and accepts all work has been completed in a workman like manner.

**Date Completed** 

Trade &/or Service Tech

Please schedule your Service Department to complete work on the above Lot. Should no appointment time or date appear (below) on this form, it is your responsibility to arrange and adhere to the appointment you have scheduled. Your service representative must have this form signed by homeowner or completion. Please fax the signed form to our office (905) 833-4367.