



SUPPORTING YOUR NEW HOME WARRANTY

STATUTORY WARRANTY FORM

Year-End Form

TO NOTIFY TARION OF OUTSTANDING WARRANTY ITEMS, COMPLETE AND SUBMIT THIS FORM IN THE FINAL 30 DAYS OF THE FIRST YEAR OF POSSESSION OF YOUR HOME.

YOU MAY SUBMIT ONLY ONE YEAR-END FORM.

Send a copy of this completed form to your builder and keep a copy for yourself.

Home Identification Information (Refer to your Certificate of Completion and Possession to complete this box.)

2023-05-23
Date of Possession (YYYY/MM/DD)

B48663
Vendor/Builder #

H3586965
Enrolment #

Civic Address (address of your home under warranty):

190
Street Number

Ramblewood Drive
Street Name

Condo Suite # (if applicable)

WASAGA BEACH
City/Town

N6P 0A7
Postal Code

98
Lot #

Project/Subdivision Name

Contact Information of Homeowner(s):

Benedicte Nieuwjaer & Mark Beatty
Homeowner's Name

Homeowner's Name (if applicable)

+1 4164148841
Daytime Phone Number

Daytime Phone Number

+1 4169938665
Evening Phone Number

Evening Phone Number

Fax Number

Fax Number

bnieuwjaer@hotmail.com
Email Address

Email Address

☒ Check this box if you are not the original registered homeowner.

☐ Check this box if you are not the original registered homeowner.

Mailing Address for Correspondent to Homeowner (if different from Civic Address above)

190
Street Number

Ramblewood Drive
Street Name

Condo Suite # (if applicable)

WASAGA BEACH
City/Town

ON
Province

N6P 0A7
Postal Code

Outstanding Items

List all outstanding items covered by the statutory warranty in the table below. If you require more space, please make copies of this page, number them and attach them to this Statutory Warranty Form.

IMPORTANT: Outstanding items must be specifically listed and described in the table below. To make a claim for an item that is on your PDI Form or that was reported by a home inspector, engineer, or other consultant, list and describe the item in the table. Include in the item description where the item is identified in the PDI Form or consultant's report (e.g., page or item number). Include the PDI Form or consultant's report as an attachment when you submit this Statutory Warranty Form.

Item #	Location	Floor/Level	Room/Area	Item/Defect Area	Description
1	INTERIOR	Basement	Unfinished Area	Floor	multiple cracks in floor <i>LESS THAN 1mm</i>
2	INTERIOR	Floor 01	Dining Room	Floor	hardwood floor cupping in the middle of the room <i>PC4</i>
3	INTERIOR	Floor 01	Kitchen	Trim	kitchen cabinet crown moulding poorly trimmed, crown moulding corners not aligned. <i>New Image</i>
4	INTERIOR	Floor 01	Kitchen	Trim	bulkhead crown moulding poorly aligned with cabinets <i>New Image</i>
5	INTERIOR	Floor 01	Bedroom	Floor	at entrance of bedroom one board cupping
6	INTERIOR	Floor 01	Other (Choose your next selection)	Closet	walking closet in the master bedroom excessive squeaking in the subfloor <i>ZANCO</i>
7	EXTERIOR	Lot/Property/yard	Not Applicable (Choose your next selection)	Foundation (Footings, etc.)	all around the house the parging is falling off <i>MCF</i>
8	EXTERIOR	Lot/Property/yard	Not Applicable (Choose your next selection)	Cladding (Brick, Siding, Stucco, etc.)	vinyl siding has been cut around the outlet for sub pump and at the furnace vent <i>ZANCO</i>
9	EXTERIOR	Lot/Property/yard	Not Applicable (Choose your next selection)	Caulking/Sealant	no caulking or sealant around the electrical panel, wood siding exposed to the elements <i>ZANCO</i>
10	EXTERIOR	Lot/Property/yard	Not Applicable (Choose your next selection)	Driveway	driveway needs top coat <i>DONE</i>

FORM ATTACHMENTS

The items specified on this Statutory Warranty Form constitute a complete list of all known warranty items which are outstanding and have not been resolved by my Builder to date

Submitted online by **Benedicte Nieuwjaer & Mark Beatty**

Homeowner's Signature

Homeowner's Signature (if applicable)

2024-05-23

Date of Signature (YYYY/MM/DD)

Remember to send a copy of this completed Form to your Builder.

Please note that you should allow your Builder's representatives or subcontractors access to your home during regular hours, at a mutually acceptable time arranged in advance, in order to complete the necessary work. Failure to do so may jeopardize your warranty rights.

TARN-YRND-04.02

Outstanding Deficiencies

Caledon Club - Phase: 1B - Lot: Block 185 - Unit 2

<u>Date Reported</u>	<u>Type</u>	<u>Number</u>	<u>Deficiency Description</u>	<u>Trade Assigned</u>	<u>Add Trade</u>	<u>Appointment Date</u>	<u>Item Completed</u>	<u>Initial</u>
<u>04Jul24</u>	Interval	20	Master Bedroom- General- adjust door not closing	<u>VIA Trim and Doors, Inc.</u> 177425	<u>Add</u>	<u>09Sep24</u>		
<u>17Jul24</u>	Interval	22	Throughout- General- svc to help repair drywall due to leak form toilet- NOT WARRANTED- COURTESY CALL	<u>Zancor - Immisfil Warranty Service</u> 177795	<u>Add</u>	<u>24Jul24</u>	✓	SK
<u>25Jul24</u>	Interval	23	Exterior- General- we have some old issues about common fence is loose and hanging on terrace and caps on post is missing Outside top of Garage door there is gap	<u>Bolton Railings Inc.</u> 177943	<u>Add</u>	<u>09Sep24</u>		
<u>06Sep24</u>	Interval	24	Foyer- General- Service repair crack above front door(Sand and paint courtesy)x2 left of closet at front door	<u>Zancor - Caledon</u> 178700	<u>Add</u>	<u>09Sep24</u>	✓	SK
<u>06Sep24</u>	Interval	25	Garage- General- repair drywall tape inside garage	<u>Zancor - Caledon</u> 178701	<u>Add</u>	<u>09Sep24</u>	✓	SK

Homeowner Signature: SK

The Homeowner acknowledges and accepts that all initialled work has been completed in a workman like manner to their satisfaction.

Date: Sept 9/24Zancor Service Technician: Rummen

8am. - paint - cool white.

ZANCOR

HOMES

Zancor Homes (Caledon) Ltd.
Warranty Services

Work Order

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

Closing Date: 05Feb24

Address: 103 Camlino Real Drive

Caledon, Ontario

Location: Caledon Club - Phase: 1B - Lot: Block 189 - Unit 6

Today's Date: 04Sep24

Contact(s): Manmohan Kalyan - Cell: (416) 509-9060 - (kalyan.maninder@gmail.com)
Manmohan Kalyan - Cell: (647) 801-1241 - (kalyan.manjit1970@gmail.com)

Email: kalyan.maninder@gmail.com

Company: Zancor - Caledon

Attention:

Telephone:

Fax:

Please Complete the following items:

DAI	Type	Issue	Appt. Date/Time	Notes
178375	Interval	Stairs- General- SHOE MOLD AT PIE STEP GROUND TO SECOND FLOOR BURIED UNDER DRYWALL/MUD	09Sep24 /am	

Date Completed: 7 SEPT 9/24

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

Date Completed: 5 SEP 9/24

Trade &/or Service Tech.

Signature:

Print Name: Manjit

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 on completion. Please fax the signed form to our office (905) 833-4367.

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.

Outstanding Deficiencies

Caledon Club - Phase: 1B - Lot: Block 189 - Unit 6

<u>Date Reported</u>	<u>Type</u>	<u>Number</u>	<u>Deficiency Description</u>	<u>Trade Assigned</u>	<u>Add Trade</u>	<u>Appointment Date</u>	<u>Item Completed</u>	<u>Initial</u>
<u>26Aug24</u>	Interval	10	Sairs- General- AT THIRD STEP FROM LANDING TO SECOND FLOOR-MAKES A CREAK SOUND IN AM ONLY	Bolton Railings Inc. 178374	Add	<u>09Sep24</u>		
<u>26Aug24</u>	Interval	11	Sairs- General- SHOE MOLD AT PIE STEP GROUND TO SECOND FLOOR BURIED UNDER DRYWALL/MUD	Zancor -Caledon 178375	Add	<u>09Sep24</u>	✓	Me
<u>26Aug24</u>	Interval	12	Exterior- General- METAL FINISH AT UNDERSIDE OF 3RD FLOOR BALCONY MISSING-WOOD EXPOSED.	Promark Aluminium LTD. 178376	Add	<u>09Sep24</u>		
<u>26Aug24</u>	Interval	13	Great Room- General- (X2) SCREENS TOO SMALL-WILL NOT STAY SECURED AT WINDOWS	Newmar 178377	Add	<u>09Sep24</u>		
<u>26Aug24</u>	Interval	14	Exterior- General- 2-3 DECK BOARDS ARE LIFTING	CANADIAN WOOD WORKERS 178378	Add	<u>09Sep24</u>		
<u>26Aug24</u>	Interval	15	Kitchen- General- BACKSPLASH TILES WERE NOT LEFT IN HOME. PLEASE DROP OFF FOR HO.	AV Classic 178379	Add	<u>09Sep24</u>		
<u>26Aug24</u>	Interval	16	Exterior- General- FRONT HOSE BIB LEAKING WHEN ON- REPLACE O-RING	Icon Plumbing & Heating 178380	Add	<u>09Sep24</u>		

Homeowner Signature: *Xmamiyi Kelly*

The Homeowner acknowledges and accepts that all initialled work has been completed in a workman like manner to their satisfaction.

Date: *SEP 9/24*Zancor Service Technician: *ROUTHIL*