



Pre-Delivery Inspection Form

Unit Enrolment #

7607-6

Please list below any damaged, incomplete, or missing items, as well as anything that is not operating properly. Also note any "substitutions" of items referred to in, or to be selected under, the Agreement of Purchase and Sale (APS) or construction contract. Please initial all changes and deletions. As a minimum, check the following:

Damaged, Incomplete or Missing	Operating Condition
- Windows, side lights and other glazing. Window and door screens. - Bathrooms, sinks and toilets. - Bathroom accessories, if provided. - Mirrors, countertops and cabinetry. - Flooring (hardwood, vinyl, ceramic tiles, carpeting). - Interior finishes and trim carpentry. - Furnace. - Hot water heater, if provided (not a rental). - Exterior finishes, driveways, walkways, decks and landscaping are complete.	- Windows, interior and exterior doors (including garage overhead door). Door locks. - Faucets: kitchen, bathroom, laundry room. - Exhaust fans (kitchen, bathroom), 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 a rental). - Air conditioning system, if provided and if conditions permit.

Item #	Room/Location	Description
①	MURDER	DEATH/DROWNING @ GUEST ROOM
2	STAIRS	Fill nail holes @ trim by, window tread corner @ stairs to 2nd floor
3	KITCHEN	DAMAGED LIGHT FIXTURE @
4	Foyer/Stairs	Gap @ Hardwood/Trim @ Landing to Basement.
	EXTERIOR	REMOVE MOTIVE OFF FRONT PORCH.

X Signature

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7676

Vendor/Builder and Home Information

Date of Possession (YYYY/MM/DD)		Vendor/Builder Licence #		Lot	Plan	Municipality
2025/01/23		B486603		7676		WRSRCH
Condominium/Project Name						
ZAVCOR HOMES (WRSRCH) LTD.						
Home/Civic Address						
12 FEDERICA (Present)						
Vendor/Builder Name		Representative Name		Representative Signature		
ZAVCOR HOMES		Giselle Feroe				

Purchaser Acknowledgement

This section should be completed and signed by all persons who are shown as purchasers on the APS for the home, or as owners of land in a construction contract (and/or by their designate*). Builders should provide the purchaser/designate with a copy of the completed form.

I have inspected my new home and I agree that the descriptions of the items listed on this form are accurate.

Purchaser Name		Purchaser Name	
GOLDMAN SACHSEN		Sachse	
Signature		Signature	
Designate Name*		Signature	
*Purchasers or owners who intend to designate someone to conduct the PDI in their place should ensure they provide written authority to the vendor/builder authorizing the designate to sign this form on their behalf.		Date (YYYY/MM/DD)	

The completed Pre-Delivery Inspection Form is a formal record of the home's condition before the purchaser takes possession. It will be used as a reference for future warranty service requests.



PDI Appointment Confirmation Form

Site: W581414 Lot Number: 767-6
Start Time: _____ Completed Time: _____

This is confirmation that our Zancor Homes representative, who conducted your PDI, has explained the below items during your PDI appointment.

Initials	Description
<u>hy</u>	Settlement cracks and nail pops are normal due to settlement. As a courtesy, the builder will come at YEAR END to patch, as required, but there will be no sanding or painting.
<u>hy</u>	Chips and scratches are not warrantable after the PDI. <u>(24 hours)</u>
<u>hy</u>	If you have laminate countertops, it is the homeowners' responsibility not to put anything hot or wet on the miter joint as this may cause damage. Any damage noted after the PDI is not warrantable.
<u>hy</u>	It is the homeowners' responsibility to install their own humidifier and dehumidifier to maintain proper humidity levels in the home.
<u>hy</u>	Garage doors are covered under the One Year Warranty. However, installation by the homeowner of a garage door opener will void this warranty.

Purchaser Name: Robert Staudsen Signature: [Signature]
Purchaser Name: _____ Signature: _____
Purchaser Name: _____ Signature: _____
Inspector Name: Aselle Fara Signature: [Signature]
Date: 10/18/2024 Date: _____