



LIVE WELL

Warranty Services  
Work Order

Phone: (905) 848-2069 Fax: (905) 848-2827

Location	<u>Eve - Tower: 1 - Unit: 502</u> <u>502 - 3515 Kariya</u>
Closing Date	<u>0000</u>
Date	<u>30Nov08</u>
Contact Name(s)	<u>Manjit Gill</u>
Contact Telephone#	
Company:	<u>Amacon Service</u>
Attention:	<u>Carlos Bravo</u>
Telephone:	
Fax:	<u>(905) 848-2827</u>
From:	<u>Warranty Services Department - Head Office</u>

Please complete the following items:

Deficiency Number	Issue		Appointment Date/Time	Notes
303 ✓	LIVING/DINING ROOM- WALLS: 1-mark right side of bedroom door 18 inches below light switch	✓		
310 ✓	MAIN BATHROOM- ELECTRICAL/LIGHTING-paint overspray on light bar	✓		
592 ✓	KITCHEN- WALLS: 1-lower corner right of fridge touch up paint	✓		
593 ✓	KITCHEN- WALLS: 2-DRYWALL DENTED right of sink 4inches above baseboard	✓		

Date Completed: Dec 11/08

Purchaser Signature: \_\_\_\_\_

The Purchaser acknowledges and accepts all work has been completed in a workmanlike manner.

Please schedule your Service Department to complete work on the above Unit. 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) 848-2827.

Failure to comply with this request will give Amacon Developments (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.

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ID# 303/310/592/593 Eve Ph 1 Lot 502

