



LIVE WELL

Warranty Services Work Order

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

#503

Location	<u>Eve - Tower: 1 - Unit: 503</u>
Closing Date	<u>503 - 3515 Kariya</u>
Date	<u>0000</u>
Contact Name(s)	<u>25Nov08</u>
Contact Telephone#	<u>Seweryn Horawa and Ayan Hussein</u>
Company:	<u>Megacity Tile</u>
Attention:	
Telephone:	
Fax:	<u>(905) 761-0990</u>
From:	<u>Warranty Services Department - Head Office</u>

Please complete the following items:				
Deficiency Number	Issue		Appointment Date/Time	Notes
247	✓ MAIN BATHROOM- TUB-CALUKING REPLACE	✓		
248	✓ MAIN BATHROOM- TUB: 1-silicone around soap tray	✓		
255	✓ ENSUITE BATHROOM- COUNTERTOPS: 1-no silicone around sink	✓		

Date Completed:

Dec 13 / 2008
[Signature]
B. Vano

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# 247/248/255 Eve Ph 1 Lot 503

Mail