



**Warranty Services
Work Order**

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

Location	<u>Eve - Tower: 1 - Unit: 703</u> <u>703 - 3515 Kariya</u>
Closing Date	<u>0000</u>
Date	<u>02Dec08</u>
Contact Name(s)	<u>Renato Benologa</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
699 ✓	LIVING/DINING ROOM- WINDOWS-BALCONY H.M. DOOR does not open		✓	
701 ✓	MASTER BEDROOM- WINDOWS- CAULKING along lower right window		✓	
702 ✓	DEN- WALLS-DRYWALL marked left wall 3 and 5 feet from floor above telephone jack		✓	
704 ✓	DEN- WALLS: 2-DRYWALL DENTED back wall at cover plate		✓	
705 ✓	DEN- FLOORING-O.K.		✓	
706 ✓	MAIN BATHROOM- DOORS-dent in frame left side 3 feet from floor		✓	
707 ✓	MAIN BATHROOM- DOORS: 1-dent in frame rightside 6 feet from floor		✓	
710 ✓	MAIN BATHROOM- COUNTERTOPS-CLEAN CAULKING		✓	
712 ✓	MAIN BATHROOM- ELECTRICAL/LIGHTING-remove paint from switch plate		✓	

Date Completed: Dec. 15/08 KY Purchaser Signature: [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# 699/701/702/704/705/706/707/710/712 Eve Ph 1 Lot 703

[Mail](#)

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