

AMACON

LIVE WELL

Warranty Services

Work Order

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

| | |
|--------------------|---|
| Location | <u>Eve - Tower: 1 - Unit: 1203</u> |
| | <u>1203 - 3515 Kariya</u> |
| Closing Date | <u>0000</u> |
| Date | <u>15Dec08</u> |
| Contact Name(s) | <u>Thanh-Van Huynh</u> |
| Contact Telephone# | |
| Company: | <u>Barwood Flooring</u> |
| Attention: | |
| Telephone: | |
| Fax: | <u>(416) 431-2393</u> |
| From: | <u>Warranty Services Department - Head Office</u> |

| Please complete the following items: | | | | |
|--------------------------------------|--|---|-----------------------|-------|
| Deficiency Number | Issue | | Appointment Date/Time | Notes |
| 1283 | LIVING/DINING ROOM-FLOORING: 1-loose boards in front of island 7 and 13th boards | ✓ | | |
| 1284 | LIVING/DINING ROOM-FLOORING: 2-scratced board 8th board in front of fan coil unit | ✓ | | |
| 1285 | LIVING/DINING ROOM-FLOORING: 3-CHIPPED board 8th board from bedroom | ✓ | | |
| 1286 | LIVING/DINING ROOM-FLOORING: 4-CHIPPED board 14th board from left wall un frobtt of island | ✓ | | |
| 1287 | LIVING/DINING ROOM-FLOORING: 5-uneven board 16th board from left wall in front of island | ✓ | | |

Date Completed: Dec 15, 2008Purchaser 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.