

## Warranty Services Work Order

LIVE WELL

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

Location	<u>Eve - Tower: 1 - Unit: 2110</u> 2110 - 3515 Kariya
Closing Date Date Contact Name(s)	0000 19Jan09 Margarita Lontoc
Contact Telephone# Company: Attention:	Allan Windows
Telephone: Fax: From:	(905) 738-1988 Warranty Services Department - Head Office

Please complete the following items:	Appointment   Notes
Deficiency Number Issue	Date/Time
6699 LIVING/DINING ROOM- WINDOWS: 2-ALUMINUM rail dented inside sliding window	allan Windows

Date Comple	ted: ,	1.
Jan	12/09	1/

Amacon Customer Care Signature:

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# 6699 Eve Ph 1 Lot 2110