## AMACON

## Warranty Services Work Order

LIVE WELL

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

Location	Eve - Tower: 1 - Unit: 902		
<u> </u>	<u>902 - 3515 Kariya</u>		
Closing Date	<u>0000</u>		
Date	<u>16Jan09</u>		
Contact Name(s)	<u>Izziddin Alokla</u>		
Contact Telephone#			
Company:	<u>Lisi Mechanical</u>		
Attention:			
Telephone:			
Fax:	(416) 674-5309		
From.	Warranty Services Department - Head Office		

Please complete the following items:					
Deficiency Number			Appointment Date/Time	Notes	
7441	MAIN BATHROOM- TUB-hot and cold are reversed				
7448/	ENSUITE BATHROOM- TUB-no cold water				
7449	ENSUITE BATHROOM- SINK-no cold water	//			
7451	KITCHEN- SINK-no hot water				

Date Completed:

14N 17 2009

Amacon Castomer 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# 7441/7448/7449/7451 Eve Ph 1 Lot 902