

A M A C O N

L I V E W E L L

**Warranty Services
Work Order**

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

Location	<u>Eve - Tower: 1 - Unit: 1008</u> <u>1008 - 3515 Kariya</u>
Closing Date	<u>0000</u>
Date	<u>13Feb09</u>
Contact Name(s)	<u>Seherzada Redzic and Emina Plavotic</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
10940 ✓	FOYER / ENTRY- DOORS-frame scratched and discolored see tape		✓	
10941 ✓	LIVING/DINING ROOM- ELECTRICAL/LIGHTING-filter missing in fancoil unit		✓	
10943 ✓	LIVING/DINING ROOM- WINDOWS- ALUMINUM scratched around balcony door, see tape		✓	
10944 ✓	LIVING/DINING ROOM- WALLS- mark on wall between bathroom and laundry closet, see tape		✓	
10945 ✓	LIVING/DINING ROOM- WALLS: 1- mark on left wall to right of bedroom, see tape		✓	
10946 ✓	LIVING/DINING ROOM- WALLS: 2- DRYWALL cracked right wall centre, see tape		✓	
10947 ✓	MASTER BEDROOM- WALLS-gaps along J-mold top of left window		✓	
10948 ✓	MASTER BEDROOM- WALLS: 1-gaps in J-mold alOng rigt side of window		✓	
10949 ✓	MASTER BEDROOM- FLOORING- CLEAN CARPET		✓	
10950 ✓	MASTER BEDROOM- WINDOWS- holes and dents in caulking along bottom of window, see tape		✓	

10952	✓ MAIN BATHROOM- WALLS- DRYWALL DENTED and marked below light switch, see tape		✓	
10953	✓ MAIN BATHROOM- DOORS-lock missing		✓	
10954	✓ MAIN BATHROOM- TUB-silicone around showerhead, tap, faucet, see tape		✓	
10955	✓ MAIN BATHROOM- ELECTRICAL/LIGHTING-outlet crooked, see tape		✓	
10958	KITCHEN- APPLIANCE-scratch on fridge door, left side, see tape		—	Whirlpool
10959	KITCHEN- APPLIANCE: 1-marks on fridge and freezer door, see tape		—	" " "
10960	✓ LAUNDRY CLOSET- DOORS-chip outside casing at atop, see tape		✓	

Date Completed:

Feb 13/09

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.

Back -
Forms
Menu

ID#

10940/10941/10943/10944/10945/10946/10947/10948/10949/10950/10952/10953/10954/10955/10958/10959/10960

Eve Ph 1 Lot 1008