

AMACON

LIVE WELL

**Warranty Services
Work Order**

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

Location	Eve - Tower: 1 - Unit: 3110
Closing Date	3110 - 3515 Kariya
Date	0900
Contact Name(s)	11Feb09
Contact Telephone#	Laurice Chayab
Company:	Amacon Service
Attention:	Carlos Bravo
Telephone:	
Fax:	(905) 848-2827
From:	Warranty Services Department - Head Office

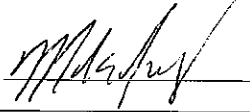
Please complete the following items:				
Deficiency Number	Issue		Appointment Date/Time	Notes
10465	✓ FOYER / ENTRY- WALLS-marks left wall 1 foot above baseboard, see tape	- Group Assign	✓	
10466	✓ FOYER / ENTRY- WALLS: 1-DRYWALL DENTED right wall 6 inches above baseboard, see tape	- Group Assign	✓	
10467	✓ FOYER / ENTRY- WALLS: 2-DRYWALL DENTED to left of gable, see tape	- Group Assign	✓	
10468	✓ FOYER / ENTRY- WALLS: 3-paint discolored above bathroom entrance, see tape	- Group Assign	✓	shadow
10493	✓ FOYER / ENTRY- DOORS-peep hole missing		✓	
10469	✓ FOYER / ENTRY- DOORS: 1-marks/scratches around door frame, see tape	- Group Assign	✓	
10496	✓ FOYER / ENTRY- FLOORING-gap in tile left side of closet door, see tape		✓	
10470	✓ FOYER / ENTRY- CLOSET-one door not sliding properly, see tape	- Group Assign	✓	put new door
10471	✓ LIVING/DINING ROOM- WINDOWS-ALUMINUM scratched at sliding window, see tape	- Group Assign	✓	
10472	✓ LIVING/DINING ROOM- WINDOWS: 1-ALUMINUM scratched 1 foot from ceiling, to left of balcony	- Group Assign	✓	
10473	✓ LIVING/DINING ROOM- WINDOWS: 2-scratches and marks window to left of balcony door, see tape	- Group Assign	✓	
10474	✓ LIVING/DINING ROOM- WINDOWS: 3-hole in caulking above balcony door, see tape	- Group Assign	✓	
10475	✓ LIVING/DINING ROOM- WALLS-left wall marks/dented to left of outlet, see tape	- Group Assign	✓	
10476	✓ LIVING/DINING ROOM- WALLS: 1-seam showing right wall to left of cable outlet	- Group Assign	✓	
10477	✓ LIVING/DINING ROOM- WALLS: 2-seam showing left wall see tape	- Group Assign	✓	
10478	✓ MASTER BEDROOM- WALLS-paint discoloration near ceiling left wall, see tape	- Group Assign	✓	
10479	✓ MASTER BEDROOM- WALLS: 1-mark on left wall to left of window by outlet, see tape	- Group Assign	✓	
10480	✓ MASTER BEDROOM- WALLS: 2-DRYWALL DENTED to left of electrical panel, see tape	- Group Assign	✓	
10481	✓ MASTER BEDROOM- FLOORING-chips in baseboard left wall, see tape	- Group Assign	✓	
10482	✓ MASTER BEDROOM- FLOORING: 1-baseboard not joined properly, right wall bt closet, see tape	- Group Assign	✓	
10483	✓ MASTER BEDROOM- CLOSET-scratches on back wall, see tape	- Group Assign	✓	
10484	✓ MAIN BATHROOM- WALLS-gap at ceiling top of tiles to front of tub	- Group Assign	✓	
10485	✓ MAIN BATHROOM- TUB-silicone around showerhead, tap and faucet, see tape	- Group Assign	✓	
10486	✓ MAIN BATHROOM- TUB: 1-marks back end, front panel, see tape	- Group Assign	✓	
10487	✓ MAIN BATHROOM- CEILING-dent above entrance, see tape	- Group Assign	✓	
10519	✓ MAIN BATHROOM- ELECTRICAL/LIGHTING-BULBS BURNED OUT		✓	
10522	✓ KITCHEN- CABINETS: 1-grout on underside of cabinet to right of fridge, see tape		✓	
10488	✓ KITCHEN- COUNTERTOPS-excessive gap underside of island countertop, see tape	- Group Assign	✓	Kitchen's
10489	✓ KITCHEN- ELECTRICAL/LIGHTING-microwave outlet is loose, see tape	- Group Assign	✓	
10490	✓ KITCHEN- ELECTRICAL/LIGHTING: 1-telephone jack not flush, see tape	- Group Assign	✓	
10491	✓ KITCHEN- WALLS-scratches on right wall by work station, see tape	- Group Assign	✓	

10492	LAUNDRY CLOSET- DOORS-gap upper left corner of casing, see tape	- Group Assign	
-------	---	----------------	--

Date Completed:

Feb 12/09 18

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#

10465/10466/10467/10468/10493/10469/10496/10470/10471/10472/10473/10474/10475/10476/10477/10478/10479/10480/10481/10482/10483/10484/10485/10486/10487/10519/10522/10488/10489/
Eve Ph 1 Lot 3110