AMACON

LIVE WELL

Warranty Services Work Order

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

| Location | Eve - Tower: 1 - Unit: 3501 |
|----------|------------------------------------|
| | 3501 _ 3515 Kariya |

Closing Date 0000

Date 27Mar09
Contact Name(s) Zeljko Kosovski and Nada Kosovski

Contact Telephone#

Company: Lisi Mechanical

Attention: Telephone:

Fax: (416) 674-5309

From: Warranty Services Department - Head Office

| Please complete the following items: | | | | | |
|--------------------------------------|--|---|-----------------------|-------|--|
| Deficiency Number | Issue | | Appointment Date/Time | Notes | |
| | LIVING/DINING ROOM- ELECTRICAL/LIGHTING-scratch on front of fancoil unit, see tape | | | | |
| | LIVING/DINING ROOM- ELECTRICAL/LIGHTING: 1-filter required in fancoil unit | V | | | |
| 12263 | MASTER BEDROOM- ELECTRICAL/LIGHTING-filter missing in fancoil unit | V | | | |
| 12265 | MASTER BEDROOM- ELECTRICAL/LIGHTING: 1-thermostat display is not working | V | | | |

| Date Comple | eted: | |
|-------------|-------|--|
| MAUCH | 27/09 | |
| | 7 | |

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# 12231/12233/12263/12265 Eve Ph 1 Lot 3501