

Warranty Services Work Order

LIVE WELL

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

Location	Fvo Toward IV. 1004
	Eve - Tower: 1 - Unit: 1901
Closing Date	<u> 1901 - 3515 Kariya</u>
	<u>0000</u>
Date	<u>03Apr09</u>
Contact Name(s)	Ana Grubisic
Contact Telephone#	- AND
Company:	Allan Windows
Attention:	TARACTO VID
Telephone:	
Fax:	<u>(905)</u> 738-1988
From:	Warranty Services Department - Head Office

	omplete the following items:					
Deficiency Number	Issue		Appointment Date/Time	Notes		
	LIVING/DINING ROOM- WINDOWS-SEAL @ PATIO CUT NEEDS REPLACING		Date Time			

Date Con	l: <i>j</i>	
April	 109	
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)

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# 5221 Eve Ph 1 Lot 1901