

Warranty Services Work Order



LIVE WELL

Phone: (905) 232-4636 Fax: (905) 232-4637

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Locatio	n	Elle - Tower: Elle - Uni	t: 3607		
Closing	Date	- 1.642.884. Üz 1448.86. 6532 - 0000	and the second of the second o		Ellegist
Date	,	06Dec10			3 4010
Contact	t Name(s)	Harmeet S. Rangi			1, 10°
Contac	t Telephone#	Res: (905) 861-9402			\(\sigma\).
Company:		Canadian Whirlpool Services			
Attentic	on:	Greg Fleming			
Telepho	one:				
Fax:		<u>(905) 476-4812</u>			
From: Warranty Services		Warranty Services Depar	tment - He	ad Office	
Please c	complete the following	ng items:			
Deficiency	Issue		Repair	Appointment	Notes
Number			Deadline	Date/Time	
24404	Main Bathroom- tub	chipped	05Nov10		
}					

Date Completed:

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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.

ID# 24404 Elle Ph Elle Lot 3607

Mail