

Attn: Chantal Andrade
FAX : 416-369-9068

AMACON

LIVE WELL

ACCESS AGREEMENT FOR SERVICE WORK

I\We, the Homeowner(s) of Suite 1111, authorize **AMACON CONSTRUCTION LTD** and/or its authorized sub\contractors to enter my\our suite for the purpose of performing any service work requested by me\us in writing.

Date of Access: 16 day of May, 2011

Details

Repair faucet in kitchen, repair thermostat &
also patch up under patio door frame

Dated the 16th day of May, 2011

Purchaser

Purchaser

I\We understand that by not signing the above-noted access permission that this may impede the Vendors ability to make any necessary repairs in an expedient manner and that I\We can revoke or provide this authorization at any time by providing notice thereof via fax to (416) 369-9069 to the attention of Grahme Walsh.

INFORMATION UPDATE	INFORMATION UPDATE
Name: <u>NATALIA OR</u>	Name:
Home phone: <u>905-568-3654</u>	Home phone:
Work phone:	Work phone:
Cell phone: <u>647-403-6661</u>	Cell phone: