

March 10, 2011

Copy to:

Amacon Development (Huronario)  
 Corp.  
 37 Bay St., Ste. 400  
 TORONTO Ontario  
 M5J 3B2  
 Vendor/Builder # 33372  
 Lot Pt. 16, Plan: Block:  
 Mississauga, City

Claudia McIntosh  
 3525 Katya Dr. 205  
 MISSISSAUGA ON  
 L5O 0C2  
 Enrolment # H1629564  
 Case # 2645235

**Your 30-Day Form was Submitted Late**

Dear Homeowner,

We regret that we cannot accept your 30-Day Form at this time. We have used the Date of Possession of record for your home, January 20, 2011, to determine that it was submitted late. You are required to submit this form during the first 30 days of possession of your new home, as described in the *Homeowner Information Package*.

We encourage you to work directly with your builder to address your concerns. Please note that you have another opportunity to report one year warranty items to Tarion between December 21, 2011 and January 30, 2012 using the Year-End Form.

**Note to Condominium Owners**

Tarion's Warranty Forms are for reporting items related to your unit. Common element items must be reported to the condominium corporation's Board of Directors. For a complete description of your unit boundaries, please refer to the disclosure statement attached to your purchase agreement.

**Manage Your Warranty Online with MyHome**

If you have not already done so, please register for MyHome, a web-based service that allows you to submit Tarion forms and manage your warranty online at your convenience. Visit [www.tarion.com](http://www.tarion.com) to register.

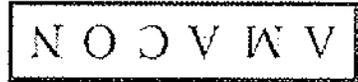
If you have any questions, please contact us at 1-877-982-7466.

Sincerely,

Suzanne Tiffin  
 Vice President, Customer Services

Not sure if your items are covered? Visit our website to view the *Construction Performance Guidelines*. The Guidelines describe many of the most commonly reported construction deficiencies and indicate which are covered by the warranty.





**Warranty Services  
Work Order**

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

L I V E W E L L

**Location** Elle - Tower: Elle - Unit: 205  
**Closing Date** 17Jul10  
**Date**  
**Contact Name(s)**  
**Contact Telephone#** Allan Windows  
**Company:**  
**Attention:**  
**Telephone:**  
**Fax:** (905) 738-1988  
**From:** Warranty Services Department - Head Office

Please complete the following items:

| Deficiency Number | Issue  | Appointment | Date/Time  | Notes |
|-------------------|--|-------------|------------|-------|
| 18615             | LIVING/DINING ROOM-<br>WINDOWS-east windows -middle<br>window frames loose and one missing |             | July 27/10 | Done  |
| 18616             | LIVING/DINING ROOM-<br>WINDOWS: 1-south window won't<br>open                               |             | July 27/10 | Done  |
| 18617             | LIVING/DINING ROOM-<br>WINDOWS: 2-south window missing<br>screws                           |             | July 27/10 | Done  |

Date Completed: July 27/10

Amacou 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 Amacou 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# 18615/18616/18617 Elle Ph Elle Lot 205

Mail

W/letter to  
MRS  
03/15/2011

Tarion Warranty Corporation  
Customer Centre  
5150 Yonge Street, Concourse Level  
Toronto, Ontario M2N 6L8  
Toll-Free: 1-877-982-7466  
www.tarion.com

Amaccon Development (Huronario) Corp.  
37 Bay St., Ste. 400  
TORONTO Ontario  
M5J 3B2  
Vendor/Builder # 33372  
Lot Pt. 16, Plan, Block:  
Mississauga, City

Copy to:

*Schedule as a  
copy of the  
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file*



March 10, 2011

Chaudia McIntosh  
3525 Karlya Dr. 205  
MISSISSAUGA ON  
L5O 0C2

Enrolment # H11629564  
Case # 26452335

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Vice President, Customer Services

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PROTECTING ONTARIO'S NEW HOME BUYERS

# 30-Day Form

**TO NOTIFY TARION OF OUTSTANDING WARRANTY ITEMS, COMPLETE AND SUBMIT THIS FORM BEFORE THE END OF THE FIRST 30 DAYS OF POSSESSION OF YOUR HOME.**

**YOU MAY SUBMIT ONLY ONE 30-DAY FORM.**

Submit this Form to the Tarion Customer Centre, located at 5150 Yonge Street, Concourse Level, Toronto, Ontario M2N 6L8, in person, by mail or courier, or by fax to 1-877-664-9710. See your Homeowner Information Package for details about submitting this Form. Send a copy of the completed Form to your Builder and keep a copy for yourself. Please print all information.

## Home Identification Information (Refer to your Certificate of Completion and Possession to complete this box.)

|  |                    |
|--|--------------------|
| Date of Possession (YYYYMMDD):                       | 2011/01/22         |
| Vendor/Builder #:                                    | 33372              |
| Enrollment #:  | 1629564            |
| Civic Address (address of your home under warranty): | 3525 Karinya Drive |
| Street Number:                                       | 3525               |
| Street Name:   | Karinya Drive      |
| City/Town:   | Mississauga        |
| Postal Code:   | L5B 8C2            |
| Lot #:   | ELK                |
| Project/Subdivision Name:                            |                    |
| Homeowner's Name (if applicable):                    | Claudia McIntosh   |
| Homeowner's Name (if applicable):                    |                    |
| Daytime Phone Number:                                | (647) 963 - 2988   |
| Evening Phone Number:                                |                    |
| Fax Number:  |                    |
| Email Address:                                       | claudiah@live.com  |

## Mailing Address for Correspondence to Homeowner (if different from Civic Address above)

|                                |  |
|--------------------------------|--|
| City/Town:                     |  |
| Street Number:                 |  |
| Street Name:                   |  |
| Postal Code:                   |  |
| Province:                      |  |
| Condo Suite # (if applicable): |  |

TARN-30DY-04.02

**Outstanding items must be specifically listed and described. A reference to the Pre-Delivery Inspection Form or to other documentation will not be accepted.**

List all outstanding items covered by the statutory warranty in the table below. If you require more space, please make copies of this page, number them and attach them to this Statutory Warranty Form.

| Item # | Room/Location | Description  |
|--------|---------------|--|
| 1      | Kitchen       | Hardwood Floor buckling. In hallway - (Review)   |
| 1      | living Rm     | electrical socket, no power - could be replaced by switch  |
| 1      | master        | not enough power to electrical socket. Breaker keeps popping   |
| 1      | exterior      | carriage left behind or not cleaned when we moved in. Needs to be scraped. - if divisive (common fix issue) (Review) |
| 1      | 2nd bedroom   | closed door is not sitting on track. properly (Review)   |
| 1      | bathroom      | around tub, not enough caulking (Review) was spread.   |

The items specified on this Statutory Warranty Form constitute a complete list of all known warranty items which are outstanding and have not been resolved by my Builder to date.

Homeowner's Signature: *[Signature]*  
 Date of Signature (YYYYMMDD): 2011/03/09

Remember to send a copy of this completed Form to your Builder.

Homeowner's signature (if applicable)

**Outstanding Deficiencies**  
**Elle - Phase: Elle - Lot: 205**

| Date Reported | Type | Number | Deficiency Description   | Trade Assigned               | Add Appointment Date |
|---------------|------|--------|--|------------------------------|----------------------|
| 14Jan11       | PDI  | 1      | LIVING/DINING ROOM - FLOORING-water spots on floor by breakfast bar                            | Amason Service               | Add NoAppoint.       |
| 14Jan11       | PDI  | 2      | LIVING/DINING ROOM - WINDOWS-south window has glue debris                                      | Professional Choice Cleaners | Add NoAppoint.       |
| 14Jan11       | PDI  | 3      | LIVING/DINING ROOM - NOTE-air vent south size is loose   | Amason Service               | Add NoAppoint.       |
| 14Jan11       | PDI  | 4      | KITCHEN - CABINETS-breakfast bar trim needs touch up also bank of drawers and doors Below sink | Cartier Kitchens             | Add NoAppoint.       |

*Done*



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 Attention: (905) 738-1988  
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 Fax: From:

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| 18617             | LIVING/DINING ROOM- WINDOWS: 2-south window missing screws                           | Done                  |       |

Amacron Customer Care Signature: \_\_\_\_\_

Date Completed: 7/17/10

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