

A M A C O N

Warranty Services  
Work Order

L I V E   W E L L

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

Location	<u>Eve - Tower: 1 - Unit: 309</u>
Closing Date	<u>309 - 3515 Kariva</u>
Date	<u>0000</u>
Contact Name(s)	<u>20Jan11</u>
Contact Telephone#	<u>Chih-Sheng Chou</u>
Company:	<u>Amacon Service</u>
Attention:	<u>Ed Valencia/ Manuela Castoligione</u>
Telephone:	<u>(905) 232-4637</u>
Fax:	<u>Warranty Services Department - Head Office</u>
From:	

## Please complete the following items:

Deficiency Number	Issue	Repair Deadline	Appointment Date/Time	Notes
24849	Living Room- Living Room Windows - walls are now moldy	23Jan11		Done
24850	Bedroom- Bedroom Windows - Walls are now Moldy	23Jan11		Done

Date Completed:

Fax 23/11

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# 24849/24850 Eve Ph 1 Lot 309

Mail