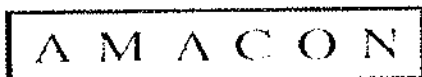


ELLE



LIVE WELL

AMACON CONSTRUCTION SERVICE REQUEST FORM

PLEASE FAX TO 416 369-9068

NAME: RAGHU AYAGARISUITE: 703TEL: 416-832-8640

BUS. TEL: _____

Cell: 905 796 9515

e-mail: _____

Project: ELLEAddress: 3525 Kariya Drive.DATE OF REQUEST: Feb 12th - 2011

Permission to enter:

YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
---	-----------------------------

Once received by an Amacon Customer Care Representative, this form becomes property of Amacon. Your request must be based on the Taron Warranty guidelines - scratches, nicks, dents are not warrantable, unless noted at time of the PDI (Pre-Delivery Inspection). Your request will be reviewed and addressed by an Amacon Representative as soon as a possible. If this is an **Emergency** please contact your concierge **immediately** at (905) 232-2631 - 24 / hours. If your concern falls under the Common Area Element Warranty Guidelines, please see Property Management to address your concerns or call at (905) 232-2374.

ITEM#	ROOM/LOCATION	DESCRIPTION
	LOCKER ROOM	G37 - P3 -
		Need to place the top mesh
		in place P.M.

ARN. Subramaniam
HOMEOWNER SIGNATURE

Feb-12th - 2011
DATE:

Faxed to Amacon
Feb 14/11

ELLE

AMACON

LIVE WELL

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SUITE: 703

TEL: 416-832-8640

BUS. TEL: _____

Cell: 905-796-9515

e-mail: _____

Project: ELLE

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YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
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ITEM#	ROOM/LOCATION	DESCRIPTION
	LOCKER ROOM	G37 - P3 -
		Need to put the top mesh
		in place.

Common Area -
get floor s/s to
put -
probably removed
to do work

A. R. N. Subramanian
HOMEOWNER SIGNATURE

Feb-12th-2011
DATE: