QUALITY RUGS OF CANADA LIMITED REPAIR ORDER

BUILDER:

AMACON

JOB SITE:

ELLE

COMPLAINT DATE

07/26/10

LOT:

803

INSTALLER:

JANI CARPETS

INSTALL DATE: OWNER'S

04/19/10

LAST NAME:

MOH -

FIRST NAME:

HOME PHONE:

CIVIC ADD 1:

OWNER'S BUS.

PHONE

CIVIC ADD 2:

TORONTO

REPAIR TIME:

SITE CONTACT:

GRAHAM 9.232.4636

REPAIR TYPE:

DEFICIENCY

REPAIRMAN

JANI

REFERENCE

19677

REP

SCHEDULED

REP DETAILS:

CARPET LIFTING BACK WALL WHERE MARKED.

Ogph

INSTALLER'S SIGNATURE

054

SUPER'S/OWNER'S SIGNATURE

DATE JOLY 18/10

NOTE*** Please have this memo signed by the owner or site super upon completion and forward it to Quality's Head Office. Repairs must be completed within 3 working days of receipt of this repair order.

Paycheques!!!! may be held if work is not completed within the required time.



Warranty Services Work Order

C 263

LIVE WELL

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

Location	Elle - Tower: Elle - Unit: 803	
	308 Brisdale Dr.	
Closing Date	0000	
Date	26Jul10	
Contact Name(s)	Andrew Pearcy and Deborah Pearcy	
Contact Telephone#	Res: (416) 705-1751	
Company:	Metropolitian Home Products	
Attention:	Rino Fiore	
Telephone:	9 (05-) 264151	
Fax:	9 (05-) 850878	
From:	Warranty Services Department - Head Office	

Please complete the following items:	
Deficiency Issue Number	Appointment Notes Date/Time
19670 FOYER / ENTRY- CLOSET-doors squeeky	Autral X/2 4

Date Completed: Fuly/29/2016

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# 19670 Elle Ph Elle Lot 803

Mail



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DEFICIENCY

REPAIRMAN

JANI

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REP

SCHEDULED

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Warranty Services Service Call

Company:	Tile Source
Attention:	Matthew Paric
Telephone:	(905) 660-7737
Fax:	(905) 660-7949
From:	Ed Valencia
Date	10Sept10
Location	Site: Elle Phase: Elle Lot; 803
	308 Brisdale Dr.
Contact Name(s)	Andrew Pearcy and Deborah Pearcy
Contact Telephone#	Res: (416) 705-1751

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.

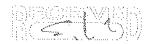
Failure to comply with this request will give Amacon Developments (and it's group of companies) the right to carry out any and all repairs. All costs incurred will be applied to the Company listed above.

Please complete the following items:			
Issuc	Appointment Date	Appointment Time	Completion Date
Dent in Granite countertop.			

Date Completed:	Purchaser Signature:	- AVENUE
Faxed:		
Pools		

Back

ID# 21065 Elle Ph Elle Lot 803



AMACON SERVICE REQUEST FORM PLEASE MAIL, FAX OR SUBMIT ON-LINE

AMACON CONSTRUCTION LTD. ATTENTION: CUSTOMER CARE
37 BAY STREET, SUITE 400 (4TH FLOOR), TORONTO, ON M5J 3B2

TEL: 416-369-9069 FAX: 416-369-9068

	A www.ainacoii.coin
N/	AME: ANDREW FRARCY & SINTE # 803
DH	EVELOPMENT NAME: ELLP
ΑI	DDRESS:
RE	S.TEL: 416-705-1751 BUS.TEL:
CE	LL: FAX:
DA	ATE OF REQUEST: Aug. 13, 2010
Rej	copy of your request form will be given to and reviewed by an Amacon Customer Care presentative. Your request and any follow up that may be required will be co-ordinated by one our Customer Care Representatives to ensure that your concerns are addressed.
g _a ,	vice Request:
	Dent in GRANITE COUNTER TOP.
	THUWAS HIGHZIGHTED ON PDI DEFECT.
2.	Form.
3.	
_	
4.	
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