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
www.amacon.com

NAME: ROBERT PALETTO

DEVELOPMENT NAME: ELLE CONDOS

ADDRESS: 3525 - 908

RES.TEL: _____ BUS.TEL: _____

CELL: 647-309-7981 FAX: _____

DATE OF REQUEST: JAN 13/11

A copy of your request form will be given to and reviewed by an Amacon Customer Care Representative. Your request and any follow up that may be required will be co-ordinated by one of our Customer Care Representatives to ensure that your concerns are addressed.

Service Request:

1. DISHWASHER / NO POWER
2. _____
3. _____
4. _____