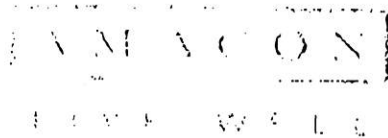




Closed
Jan. 11. 12



AMACON CONSTRUCTION SERVICE REQUEST FORM

PLEASE FAX TO 416 369-9068

NAME Kim Parfilyov SUITE 2606
TEL (416) 294-0886 BUS TEL _____
Cell _____ e-mail: _____
Project _____ Address 3525 Kariga Dr

DATE OF REQUEST 2012/08/23 Permission to enter

YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
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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 possible. If this is an **Emergency** please contact your concierge **immediately** at (289) 521-1313 - 24 / hours. If your concern falls under the Common Area Element Warranty Guidelines, please see Property Management to address your concerns or call at (289) 521-1199.

ITEM#	ROOM/LOCATION	DESCRIPTION
1	Bathroom	Seal line between bathtub and the wall is coming off.


HOMEOWNER SIGNATURE

2012/08/23
DATE: