

AMACON

Wednesday, December 12, 2012

Robert Vedar
4065 Brickstone Mews #208
Mississauga, Ontario L5B 0G3

RE: Completed Items on your 30 day form #208

Dear Robert Vedar,

Your satisfaction with your new home is important to us. Our records indicate that your **30 day form** items have been completed. Amacon would like your confirmation of the above mentioned completion. A copy of that list is attached. Please review it and confirm that all items listed have been resolved.

If you believe that Amacon has overlooked any listed deficiency from the original **30 day form** please note the number of the item in the space below. If all items have been resolved, simply sign the acknowledgement.

It is Mandatory that this form be returned either by mail, fax, or email
(customercareto@amacon.com) by: **December 18th, 2012.**

Your feedback about our service or your new home helps us improve our business.
Please let us hear from you.

Sincerely,


Amacon Customer Care

- ☐ All homeowner's **30 day item(s)** have been resolved.
- ☐ The following **30 day item(s)** still need attention (you need only list the item number.)
- _____

Comments

Homeowner

Date

STATUTORY WARRANTY FORM



30-Day Form

TO NOTIFY TARION OF OUTSTANDING WARRANTY ITEMS, COMPLETE AND SUBMIT THIS FORM
BEFORE THE END OF THE FIRST 30 DAYS OF POSSESSION OF YOUR HOME.
YOU MAY SUBMIT ONLY ONE 30-DAY FORM.

Send a copy of the completed Form to your Builder and keep a copy for yourself.

Home Identification Information (Refer to your Certificate of Completion and Possession to complete this box.)

2012-10-01	B38706	H1752030
Date of Possession (YYYY/MM/DD)	Vendor/Builder #	Enrolment #
Civic Address (address of your home under warranty):		
4065	Brickstone Mews	208
Street Number	Street Name	Condo Suite # (if applicable)
MISSISSAUGA	L5B 0G3	pt of lot#19
City/Town	Postal Code	Lot #
Project/Subdivision Name		

Contact Information of Homeowner(s):

Robert Vedar	
Homeowner's Name	Homeowner's Name (if applicable)
(647) 997-4473	
Daytime Phone Number	Daytime Phone Number
(647) 997-4473	
Evening Phone Number	Evening Phone Number
Fax Number	Fax Number
rvedar@yahoo.com	
Email Address	Email Address
<input type="checkbox"/> Check this box if you are not the original registered homeowner.	<input type="checkbox"/> Check this box if you are not the original registered homeowner.

Mailing Address for Correspondence to Homeowner (if different from Civic Address above)

4065	Brickstone Mews	208
Street Number	Street Name	Condo Suite # (if applicable)
MISSISSAUGA	ON	L5B 0G3
City/Town	Province	Postal Code

TARN-30DY-04.02

Outstanding items must be specifically listed and described.

A reference to the Pre-Delivery Inspection Form or to other documentation will not be accepted.

Outstanding Items

List all outstanding items covered by the statutory warranty in the table below. If you require more space, please make copies of this page, number them and attach them to this Statutory Warranty Form.

Enrolment # H1752030

Item #	Floor/Level	Room/Area	Item/Defect Area	Description
INTERIOR				
1	Floor 01	Bathroom	Wall	One of tile has a very small hole. I think the grout was being applied, it missed a very small part. I know its just aesthetics but water can enter that very small hole.
2	Floor 01	Bathroom	Bathub	Has some deep scratches. At the beginning I thought it was just a dirt buildup but when I tried removing it my finger that is when I realized it was scratched deeply.
3	Floor 01	Bedroom	Doors	I can feel draft coming from the door leading to the balcony.
4	Floor 01	Living Room	Electrical	One of the power outlet is not working. I tried plugging a charger but it wont charge my phone.
5	Floor 01	Living Room	Windows	The window screen is punctured. I didn't notice that during Pre Delivery Inspection.

ATTACHMENTS

File Name #	Description
bath tub.JPG	Bath tub
screen.JPG	screen
tile.JPG	Bathroom tile

The items specified on this Statutory Warranty Form constitute a complete list of all known warranty items which are outstanding and have not been resolved by my Builder to date.

Submitted online by Robert Vedar

Homeowner's Signature

2012-10-30

Date of Signature (YYYY/MM/DD)

Homeowner's Signature (if applicable)

Remember to send a copy of this completed Form to your Builder.

Please note that you should allow your Builder's representatives or subcontractors access to your home during regular business hours, at a mutually acceptable time arranged in advance, in order to complete the necessary work. Failure to do so may jeopardize your warranty rights.

TARN-30DY-04.02

December 11th, 2012

Re: Residences # 208 30 Day Item #1

Issue: Hole in Grout.

Response: This item has been completed.



December 11th, 2012

Re: Residences #208 30 Day Item #2

Issue: Tub has deep scratches

Response: This item has been completed.

14/11/2012

December 11th, 2012

Re: Residences #208 30 Day Item #3

Issue: Draft coming from the door leading to the balcony.

Response: This item has been completed. Amacon Customer Care replaced the handle and put some insulation inside which has stopped the draft from coming through the handle. We also caulked below the window sill as there was also a draft.

12/12/2012

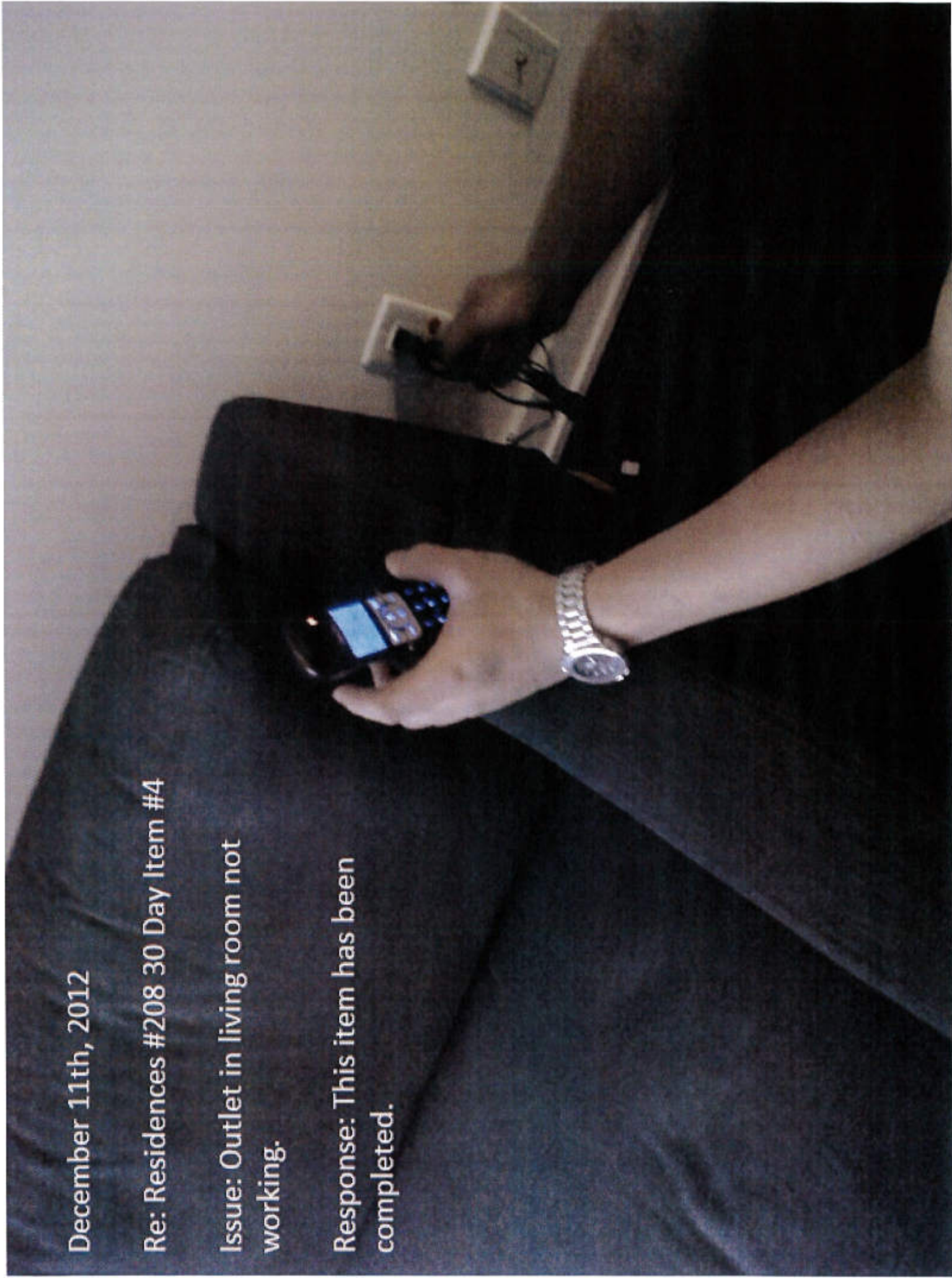


December 11th, 2012

Re: Residences #208 30 Day Item #4

Issue: Outlet in living room not working.

Response: This item has been completed.



December 11th, 2012

Re: Residences #208 30 Day Item #5

Issue: Window Screen punctured.

Response: This item has been replaced.

