

PDI Page 1 of 1



Vendor/Builder#

Purchaser Name:

Lorraine Anderson

Phone Res: Phone Bus: Closing Date: Inspector:

(705) 719-7384

2013-08-28 Bruno Tidd Enrollment#

Legal Address: Project: Plan #: Lot / Phase #:

Municiaplity:

Pratt Hansen Group

43306 / Building43

Inspection Date: 25 Aug 2013

Please list below any damaged, incomplete, or missing items and anything that is not in good operating condition.

Also note any (substitutions) of items referred to in, or to be selected under, the Agreement of Purchase and Sales (APS). Please initial all changes and deletions. As a minimum, check the following:

DAMAGED, INCOMPLETE OR MISSING

· Windows, side lights and other glazing. Window and door screens

· Bathtub sinks and toilets

· Hot water heater, if provided (not rental)

Bathroom accessories if provided
 Mirrors, counter tops and cabinetry
 Flooring (hardwood, vinyl, ceramic tiles, carpeting)
 Interior finished and trim carpentry

· Exterior finished, driveways, walkways, decks and landscaping

OPERATING CONDITION

Windows, interior and exterior doors including garage overhead doors, door

locks

· Faucets: Kitchen, bathroom, laundry room

Exhaust fans (kitchen, bathrooms) if provided
Electrical outlets and fixtures
Gas fireplaces, incl. circulation fans, if provided
Heat Recovery Ventilation system, if provided

Heating system
Hot water heater, if provided (not rental)
Air conditioning system, if provided and if conditions permit

Also list here anything that can't be assessed because for example is dirty or inaccessible. GENERAL COMMENTS INSPECTION STARTED AT 12:00 P.M. INSPECTION START TIME TOUCH UPS REQUIRED THROUGH OUT AS INDICATED NEW TELEPHONE NUMBER 705-719-7384 MASTER BEDROOM CLOSET EDOOR ON LEFT SCRATCHED WALK IN CLOSET KITCHEN LOWER CABINET TO LEFT OF BANK OF DRAWERS NEEDS CABINETS LOWER CABONET TO RIGHT OF STOVE SHELF NOT ADJUSTMENT. CHIPPED EDGE PIECE RIGHT SIDE TO LEFT OF SINK COUNTERTOPS EXTERIOR CAULKING PEELING AWAY SLIGHTLY FROM STUCCO ON LEFT NOTE: SIDE.

THE COMPLETED PRE-DELIVERY INSPECTION IS A FORMAL RE POSSESSION IT WILL BE USED AS A REFERENCE FOR FUTURE V * Purchasers or owners who intend to designate someone to conduct the I	WARRANTY REQUESTS	
authorizing the designate to sign this form on their behalf.	ρ	
Builder Representative	Evalue Aud	leron
Designate's Name(please print) I the homeowner, confirm that all repair work listed has been completed	Designate's Signature	
		_
	Purchaser	Date

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