STATUTORY WARRANTY FORM



TARN-YRND-03 02

Year-End Form

TO NOTIFY TARION OF OUTSTANDING WARRANTY ITEMS, COMPLETE AND SUBMIT THIS FORM IN THE FINAL 30 DAYS OF THE FIRST YEAR OF POSSESSION OF YOUR HOME.

YOU MAY SUBMIT ONLY ONE YEAR-END FORM.

Submit this Form to the Tarion Customer Centre, located at 5150 Yonge Street, Concourse Level, Toronto, Ontario M2N 6L8, in person, by mail or courier, or by fax to 1-877-664-9710. See your Homeowner Information Package for details about submitting this Form. Send a copy of the completed Form to your Builder and keep a copy for yourself. Please print all information.

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201010411. 342 Date of Possession (YYYY/MM/DD) Vendor/Builder#	34 1663571 Enrolment#
Civic Address (address of your home under warranty):	
39 Coulter St	中 21
Street Number Street Name	Condo Suite # (if applicable)
	1021 SunnidatiViole
City/Town Postal Code	
City/Town Postal Code	Lot#
Contact Information of Homeowner(s):	Project/Subdivision Name
On Mot information of Florida Miles	
MEDICAL P RACOLL	HELEN M. WHITE
MERLYN R. BACON Homeowner's Name	Homeowner's Name (if applicable)
Section of the Contraction of th	
(705) 719 - 6828	(705) 719 - 6828
Daytime Phone Number	Daytime Phone Number
() SAME-	()SAME -
Evening Phone Number	Evening Phone Number
	() NA -
() NA -	The state of the s
Fax Number	Fax Number
mrbacon @sympatico.ca	mrhama @ summatica.ca
Email Address	mrbacon @sympatico.ca Email Address
Check this box if you are not the original	Check this box if you are not the original
registered nomeowner.	registered homeowner.
Mailing Address for Correspondence to Homeowner	(if different from Civic Address above)

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You may submit only one Year-End Form, so be sure it is complete.

Tarion will only accept and act on the first Year-End Form that has been properly submitted on time.

Outstanding Items

List all outstanding items covered by the statutory warranty in the table below. If you are reporting a Special Seasonal Item, please also check the box below. If you require more space, please make copies of this page, number them and attach them to this Statutory Warranty Form.

> Check this box to report an outstanding Special Seasonal Item such as grading, sodding, walkways or paving. Please also provide details below.

Item#	Room/Location	
	LREBRIS	NAU POPS. (OUTSIDE WALLS)
2	#7 80	NAIL POPS. (OUTSIDE WALLS) 5"Scratch on outside of window
	72015	5 3010000
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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.

Homeowner's **S**gnature

2011/04/12 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.

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