

Zancor North Inc. Warranty Services Phone: (905) 738-7010 Fax: (905) 738-5948

Work Order

Closing Date:
Address:

Location:
Today's Date:
Contact(s): Bianca Crescent
Wasaga Beach
The Village of Trillium Forest - Phase: 3 - Lot: Block 134 Unit 4
: 03Feb21
Shawna Leigh Thomson - Home: (705) 241-8113
Alf, B Pistolkors just_shawna@yahoo.ca

Email:

Wasaga Zancor Warranty Service

Company:
Attention:
Telephone:

(705) 428-6483 (705) 428-6484

Please Complete the following items:

Please Colli	riedse complete the following items:	wing nems:			
DAI	Type	Issue		Appt. Date/Time	Notes
141948	30-Day	Master Ensuite- General- INSTALL		03Feb21 /am	Arrival 8am
		SHOWER FIXTURE NON-ISSUE, PREVIOUSLY COMPLETED	-		
141949	30-Day	Master Ensuite- General- INSTALL REPLACEMENT		03Feb21 /am	Arrival 8am
		SHOWER DOOR-NON-ISSUE, PREVIOUSLY COMPLETED	<		
141950	30-Day	Master Bedroom- General- ADJUST ENTRY DOOR	_	03Feb21 /am	Arrival 8am
141951	30-Day	Other- General- GMDADJUST CLOSING HINGESNON- ISSUE, DOOR CLOSED PROPERLY AT TIME OF		03Feb21 /am	Arrival 8am

\			H/O TO MONITOR		
Arrival 8am	03Feb21 /am	1	Basement- General- SUMP PUMP PIPE IS NOISYNON-ISSUE,	30-Day	141958
	03Feb21 /am	5	Basement- General- RE-POSITION HRVNON-ISSUE, NO LOCATION SPECIFIED	30-Day	141957
	03Feb21 /am		Main Hall- General- FLOOR SQUEAK IN FRONT OF TUBVIYNL MAY BE RUBBING TUB, WILL INSPECT	30-Day	141956
	03Feb21 /am		Master Ensuite- General- RE-DAP COUNTERWILL COMPLETE AS A COURTESY	30-Day	141955
	03Feb21		Kitchen- General- MOVE CAPPED LIGHT OVER, AT PENNISULA. THEN REPAIR CEILING	30-Day	141953
			INSPECTION		

	Date Comple
2	pleted: 🗡
	3663

Homeowner Signature:

The Homeowner acknowledges and accepts all work has been completed in a workman like manner.

Trade &/or Service Tech.

Date Completed:

Signature:

Print Name:

Please schedule your Service Department to complete work on the above Lot. Should no appointment time or date appear (below) on this form, it is your responsibility to arrange and adhere to the appointment you have scheduled. Your service representative must have this form signed by homeowner on completion. Please fax the signed form to our office (905) 833-4367.

Failure to comply with this request within 10 business days will give Zancor Homes (and it's group of companies) the right to carry out any and all repairs. All costs incurred will be applied to the Company listed above.

Outstanding Deficiencies The Village of Trillium Forest - Phase: 3 - Lot: Block 134 Unit 4

<u>05Jan21</u>	<u>05Jan21</u>	<u>05Jan21</u>	05Jan21	05Jan21	05Jan21	05Jan21	<u>05Jan21</u>	<u>05Jan21</u>	05Jan21	<u>05Jan21</u>	05Jan21	<u>Date</u> <u>Reported</u>
30-Day	30-Day	30-Day	30-Day	30-Day	30-Day	30-Day	30-Day	30-Day	30-Day	30-Day	30-Day	Туре
=	10	9	00	7	6	5	5	4	ယ	2	_	Number
Basement- General- dent on bottom panel right garage doorREPORTED AT PDI	Basement- General- SUMP PUMP PIPE IS NOISYNON-ISSUE, H/O TO MONITOR	Basement- General- RE-POSITION HRVNON-ISSUE, NO LOCATION SPECIFIED	Main Hall- General- FLOOR SQUEAK IN FRONT OF TUBVIYNL MAY BE RUBBING TUB, WILL INSPECT	Master Ensuite- General- RE-DAP COUNTERWILL COMPLETE AS A COURTESY	Stairs- General- T-MOLD LOOSE ALL AROUND STAIR RAILING	Kitchen- General- MOVE CAPPED LIGHT OVER, AT PENNISULA. THEN REPAIR CEILING	Kitchen- General- MOVE CAPPED LIGHT OVER, AT PENNISULA. THEN REPAIR CEILING	Other- General- GMDADJUST CLOSING HINGESNON-ISSUE. DOOR CLOSED PROPERLY AT TIME OF INSPECTION	Master Bedroom- General- ADJUST ENTRY DOOR	Master Ensuite- General- INSTALL REPLACEMENT SHOWER DOOR NON-ISSUE, PREVIOUSLY COMPLETED	Master Ensuite- General- INSTALL SHOWER FIXTURENON-ISSUE, PREVIOUSLY COMPLETED	Deficiency Description
Abbey Overhead Doors Inc. 141959	Wasaga Zancor Warranty Service 141958	Wasaga Zancor Warranty Service 141957	Wasaga Zancor Warranty Service 141956	Wasaga Zancor Warranty Service 141955	<u>First</u> <u>Canadian</u> <u>Hardwood</u> 141954	Wasaga Zancor Warranty Service 141953	Mykon Electric North Ltd 141952	Wasaga Zancor Warranty Service 141951	Wasaga Zancor Warranty Service 141950	Wasaga Zancor Warranty Service 141949	Wasaga Zancor Warranty Service 141948	<u>Trade</u> <u>Assigned</u>
Add	Add	Add	Add	Add	Add		Add	Add	Add	Add	Add	Add Trade
NoAppoint.	03Feb21	<u>03Feb21</u>	<u>03Feb21</u>	<u>03Feb21</u>	<u>03Feb21</u>	<u>03Feb21</u>	<u>03Feb21</u>	<u>03Feb21</u>	<u>03Feb21</u>	<u>03Feb21</u>	<u>03Feb21</u>	Add Appointment Trade Date
							7					Item Completed
	(F)	B	A	B		F	F	F	E	美	F	Initial

The Homeowner acknowledges and accepts that all initialled work has been completed in a workman like manner to their satisfaction. Date: Zancor Service Technician: Homeowner Signature: X ROWHER

Company:Zancor Homes	Covid-19 Assessment Form
Date:	
Fig. 3/2	

Service Technician:

				12 (200) 5 Mm	Couris Michaels Myron	THE PISICIKURS	SMAWNA THOMSON	Homeowner Names (everyone present at time of appointment)
				N. C.	2	>	>	Have you been in contact with a person who has a potential or a confirmed case of the COVID-19 virus in the last 14 days?
				2		1	N	Have you travelled or been in contact with someone who travelled outside of Canada within the past 14 days?
				2	7	N	N.	Do you have or have you exhibited any Cold or Flu like symptoms within the past 7 days? If yes, please elaborate
					2	>	V	Do you have any other reason to believe that you may have been potentially exposed to the COVID-19 Virus?
								Notes



Zancor North Inc.
Warranty Services

Work Order

Phone: (905) 738-7010

Fax: (905) 738-5948

Closing Date: Address: **Bianca Crescent** 27Nov20

Today's Date: Location: 23Feb21 The Village of Trillium Forest - Phase: 3 - Lot: Block 134 Unit 4

Wasaga Beach

Contact(s):

Email: Shawna Leigh Thomson - Home: (705) 241-8113 Alf, B Pistolkors just_shawna@yahoo.ca

Telephone: Attention: Company: (705) 428-6483 (705) 428-6484 Wasaga Zancor Warranty Service

Please Complete the following items:

DAI	Туре	Issue		Appt. Date/Time	Notes
142677	Interval	Garage- General- inspection of leak at garage	7	24Feb21 /day	WATER YEST

Date Completed:

Homeowner Signature:

has been completed in a workman like manner The Homeowner acknowledges and accepts all work

Trade &/or Service Tech.

Date Completed:

Signature:

Print Name:

B

adhere to the appointment you have scheduled. Your service representative must have this form signed by homeowner on completion. Please fax the signed form to our office (905) 833-4367 appointment time or date appear (below) on this form, it is your responsibility to arrange and Please schedule your Service Department to complete work on the above Lot. Should no

applied to the Company listed above. it's group of companies) the right to carry out any and all repairs. All costs incurred will be Failure to comply with this request within 10 business days will give Zancor Homes (and

Covid-19 Assessment Form

Company: ___Zancor Homes_ Date:

Service Technician:_

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					Alf 1:5 tolkon	Homeowner Names (everyone present at time of appointment)
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					16	Do you have any other reason to believe that you may have been potentially exposed to the COVID-19 Virus?
						Notes