



Phone: (905) 738-7010

Fax: (905) 738-5948

Work Order

Closing Date	: 25Aug	22					
Address:							
Location:	The state of blocking - I made. I - Lot. Office 17 (Block 3)						
Today's Date Contact(s):	: 18Aug2	22					
Email:							
Company:		ont Drywall					
Attention: Telephone:	Daniel/Paul/Renato						
reæphone: Fax:	-			Tues, Aug 23/22			
	(500) /	(000) / 02 / 000		sign work order & return to Amy			
Please Comp	lete the fol	lowing items:	•	STIPPI	Œ		
DAI	Туре	Issue		Appt.	Notes	ľ	
	, ·			Date/Time	110100		
149568	PDI	UPPER HALL-					
		WALLS~DENT IN					
		STIPPLE ABOVE					
		STAIRS					
149569	PDI	MASTER BEDROOM-					
		NOTE:~DENT IN					
		STIPPLE RIGHT OF					
		LIGHT FIXTURE					
						I.	
Date Compl	eted:		Homeowner Signature:				
. / /			The Homeowner acknowledges and accepts all work				
	1		has bee	en completed	in a workman like manne	er.	
Date Compl	etell.		Lor Service Tegh.				
Date Compi		161	rraue d	Service	reun.		
	V .	/ //X .	Signatu	re:	/		
		M	J.g. idita				

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.

Print Name:

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