



Zancor Homes (Innisfil) Ltd.
Warranty Services
Phone: (905) 738-7010
Fax: (905) 738-5948

~~Call Altham~~
Work Order ~~ON your DAY~~
~~if this~~

MAR 9 / 23

5003-38

MASTER
ENSUITE

Prest

Closing Date: 09Mar23

Address:

Location: Belle Aire Shores - Phase: 3 - Lot: 83W

Today's Date: 06Mar23

Contact(s):

Email:

Company: New Image Kitchens

Attention:

Telephone: (416) 739-0007

Fax: (416) 739-7031

Please Complete the following items:

| DAI | Type | Issue | | Appt. Date/Time | Notes |
|--------|------|--|--|--------------------|-------------|
| 154935 | PDI | KITCHEN- CABINETS~1) CHIP AT ISLAND ELECTRICAL GABLE FACING BREAKFAST AREA 2) CHIP AT BOTTOM GABLE LEFT OF BANK OF DRAWERS 3) CHIP INSIDE BOTTOM GABLE FACING LIVING ROOM | | | <u>Done</u> |
| 154946 | PDI | MAIN BATHROOM- VANITY CABINETS~CHIP INSIDE RIGHT CABINET BELOW RIGHT SINK | | | <u>Done</u> |
| 154950 | PDI | MASTER ENSUITE BATH- VANITY CABINETS~CHIP AT FILLER PIECE BELOW LEFT SINK AND BOTTOM LEFT CABINET 2) CHIP AT SHELF AT MIDDLE | | | <u>Done</u> |

| | | | | | |
|--|--|---|--|--|--|
| | | CABINET 3) CHIP ON SIDE STRIP RIGHT OF SINK | | | |
|--|--|---|--|--|--|

Date Completed: _____

Homeowner Signature: N/a

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

Date Completed: 9 May, 2023

Trade &/or Service Tech.

Signature: Inder

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.