

ZANCOR Zancor Homes (Innisfil) Ltd. Warranty Services

Phone: (905) 738-7010 Fax: (905) 738-5948

| Closing Date: Address: Location: Today's Date: Contact(s): Email: | Belle Air | re Shores - Phase: 3 - Lot: | (A-SA | | | | | | |
|---|-----------------------|--|-------|---|-------|----------|--|--|--|
| Company: Attention: Telephone: Fax: | Icon Plu (647) 526 | mbing & Heating 6-0027 | | | | F. 15 18 | | | |
| Please Compl | ete the follo | owing items: | | | 11.00 | | | | |
| DAI | Туре | Issue | | Appt. Date/Time | Notes | | | | |
| 158271 | PDI | MASTER ENSUITE BATH- FAUCETS/PLU MBING~SHOWER HEAD NOT GETTING WATER | | | | | | | |
| Date Completed: | | | | Homeowner Signature: The Homeowner acknowledges and accepts all work has been completed in a workman like manner. | | | | | |
| Date Completed: | | | | Trade &/or Service Tech. | | | | | |
| | | | | Signature: | | | | | |

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.



Zancor Homes (Innisfil) Ltd.

Phone: (905) 738-7010 Fax: (905) 738-5948

| Closing Date: Address: Location: Today's Date: Contact(s): Email: | Belle Air | e Shores - Phase: 3 - Lot: | 215W | | (ASAP) | | | |
|---|--------------|---|---|------------------------------|--------|---|--|--|
| Company: Attention: Telephone: Fax: | (647) 526 | mbing & Heating 6-0027 | | | | | | |
| Please Compl | te the follo | wing items: | | Appt. | Notes | 1 | | |
| DAI | Туре | 19306 | | Date/Time | | | | |
| 158300 | PDI (i) | SHARED ENSUITE- F AUCETS/PLUMBING~ TOILET STILL RUNNING AFTER BEING FLUSHED | | | | | | |
| Date Completed: | | | Homeowner Signature: The Homeowner acknowledges and accepts all work has been completed in a workman like manner. | | | | | |
| Date Completed: | | | | Trade &/or Service Tech. | | | | |
| | | | Signature: | | | | | |
| | | | | Print Name: Blank Dive 19/23 | | | | |

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