

09Aug23

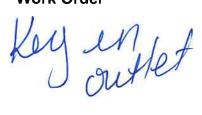
Closing Date:

Address:

Phone: (905) 738-7010

Fax: (905) 738-5948

## **Work Order**



Company: Attention: Felephone: Fax:	Daniel/ (905) 7	ont Drywall Paul/Renato 92-2718	ay ay2 STIP	1. Sep PLE 1	Sept 5	(anytime) anytime)	
Please Comp DAI	Type	Issue			Appt. Date/Time	Notes	
158528	PDI	Family Room- General- WALLS~ of STIPPLE CEILIN MISSING by archw near window	İG				
158530	PDI	KITCHEN- WALLS~TAPING COMING APART A ENTRANCE TO KITCHENETTE	Т				
Date Completed:				Homeowner Signature:  The Homeowner acknowledges and accepts all workman like manner.			
Date Completed:				Trade &/or Service Tech. Signature:			
				Print Name:			

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.

## Rivers Edge - Phase: 1 - Lot: 43

158528 - 1 - WALLS~ part of STIPPLE CEILING MISSING by archway near window



158530 - 1 - WALLS~TAPING COMING APART AT ENTRANCE TO KITCHENETTE

