

Enrollment:
Purchaser Name: ?????
Gianfranco Ficele
Phone Res:
Phone Bus: (416) 587-6910
Closing Date: October 05, 2023
Inspector: Gisella Fiore



Vendor / Builder: 44528
Project: Zancor Homes (Innisfil) Ltd.
Lot / Phase: 353W / 3
Plan:
Address:
Municipality:
Inspection Date: September 13, 2023

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Please list below any damaged, incomplete, or missing items and anything that is not in good operating condition. Also note any (substitutions) of items referred to in, or to be selected under, the Agreement of Purchase and Sales (APS). Please initial all changes and deletions. As a minimum, check the following:

DAMAGED, INCOMPLETE OR MISSING

- Windows, side lights and other glazing. Window and door screens
- Bathtub sinks and toilets
- Bathroom accessories if provided
- Mirrors, counter tops and cabinetry
- Flooring (hardwood, vinyl, ceramic tiles, carpeting)
- Interior finished and trim carpentry
- Furnace
- Hot water heater, if provided (not rental)
- Exterior finished, driveways, walkways, decks and landscaping

OPERATING CONDITION

- Windows, interior and exterior doors. Door locks
- Faucets: Kitchen, bathroom, laundry room
- Exhaust fans (kitchen, bathrooms) if provided
- Electrical outlets and fixtures
- Gas fireplaces, incl. circulation fans, if provided
- Heat Recovery Ventilation system, if provided
- Heating system
- Hot water heater, if provided (not rental)
- Air conditioning system, if provided and if conditions permit

FOYER/HALL

STAIRS	SCRATCH ON 4TH TREAD AT STAIRS FROM MAIN TOO 2ND FLOOR. AND NOSING AT 2ND FLOOR	_____	_____
	CHIP AT NEWEL AT 2ND FLOOR. RIGHT SIDE.	_____	_____
	SUCURE TRIM RIGHT AND LEFT SIDE AT STAIRS TO BASEMENT.	_____	_____
WALLS	BOWED BASEBOARD RIGHT OF FRONT DOOR.	_____	_____
NOTE:	SECURE HANDLE AT FOYER CLOSET	_____	_____

MASTER ENSUITE BATH

VANITY CABINETS	CHIP AT BOTTOM GABLE BELOW LEFT SINK	_____	_____
	CHIP AT LEFT EDGE AT COUNTERTOP OF SINK.	_____	_____
NOTE:	SCRATCH INSIDE TUB	_____	_____
FLOORING	ADJUST CARPET SHIM THROUGHOUT 2ND FLOOR	_____	_____

MASTER BEDROOM

NOTE:	HANDLES NOT INSTALLED ON BEDROOM DOOR	_____	_____
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MAIN BATHROOM

VANITY CABINETS	ADJUST COUNTERTOP EDGE RIGHT OF SINK	_____	_____
	CHIP AT UPPER FILLER LEFT OF SINK BELOW COUNTERTOP.	_____	_____
FAUCETS/PLUMBING	HOT AND COLD REVERSED IN TUB	_____	_____

UPPER HALL

FLOORING	CHIP AT 3RD PLANK RIGHT OF MASTER BEDROOM DOOR AND AT T MOLD INFRONT OF MASTER	_____	_____
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KITCHEN			
CABINETS	CHIP AT UPPER RIGHT CABINET ABOVE FRIDGE AND UNDER GABLE	_____	_____
	CHIP AT LEFT UPPER GABLE RIGHT OF FRIDGE AND UPPER RIGHT CABINET RIGHT OF FRIDGE.	_____	_____
	SHELF NOT INSTALLED AT BOTTOM CABINET RIGHT OF FRIDGE	_____	_____
	CHIP AT BOTTOM RIGHT CABINET RIGHT OF STOVE.	_____	_____
	SECURE KICKPLATE PLATE RIGHT OF FRIDGE.	_____	_____
	SMALL CHIP LEFT ISLAND EDGE AT PANEL	_____	_____
ELECTRICAL/LIGHTING	ELECTRICAL OUTLET AT ISLAND SHOULD BE DART AS PER CABINETS.	_____	_____
LIVING ROOM			
FLOORING	CHIP AT 7TH ARCH FROM RIGHT ARCH AT ENTRANCE FROM DINNING. AND 14TH PLANK FROM RIGHT WALL OF WINDOW.	_____	_____
WALLS	CRACK ABOVE ARCHWAY AT ENTRANCE IN LIVING.	_____	_____
EXTERIOR			
PAINT	HOMEOWNER REQUESTING ANOTHER COAT OF PAINT ON FRONT DOORS	_____	_____
	CLEAN RUST OFF EXTERIOR FRONT DOOR TRIM	_____	_____
	CHIP AT COLUMN AT FRONT PORCH.	_____	_____
	REMOVE PLASTER OFF GARAGE SLAB	_____	_____
NOTE:	CHIP AT LEFT PORCH SLAB	_____	_____
	POWER WASH REQUIRED AT HOUSE GARAGE TRIM	_____	_____

THE COMPLETED PRE-DELIVERY INSPECTION IS A FORMAL RECORD OF THE HOME'S CONDITION BEFORE THE PURCHASER TAKES POSSESSION IT WILL BE USED AS A REFERENCE FOR FUTURE WARRANTY REQUESTS.

* Purchasers or owners who intend to designate someone to conduct the PDI in their place should ensure they provide written authority to the vendor/builder authorizing the designate to sign this form on their behalf.

I have inspected my new home and I agree that the description of the items listed on this form are accurate.

?????

Gianfranco Ficele

Purchaser's Name (print)

Purchaser's Signature

Purchaser's Name (print)

Purchaser's Signature

Gisella Fiore

Designate's Name (print)

Designate's Signature

Inspector's Name (print)

Inspector's Signature

Date (YYYY/MM/DD)

2023/09/13

September 13, 2023