

**Enrollment:**  
**Purchaser Name:** Craig BUJARSKY  
Nancy HENRIQUES BUJARSKY  
**Phone Res:** (416) 420-5743  
**Phone Bus:** (416) 574-7050  
**Closing Date:** December 32, 1969  
**Inspector:** Gisella Fiore



**Vendor / Builder:**  
**Project:** Zancor Oakville Ltd.  
**Lot / Phase:** 619 / 1  
**Plan:**  
**Address:** 2450 Old Bronte Road, Suite 619  
**Municipality:**  
**Inspection Date:** October 16, 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

**KITCHEN**

CABINETS	MISSING HANDLES AT BANK OF DRAWERS RIGHT OF STOVE.	_____	_____
	DENT AND SCRATCH AND FRIDGE GABLE LEFT OF FRIDGE AND UPPER CABINET ABOVE FRIDGE. .	_____	_____
	UPPER GABLE RIGHT OF MICROWAVE PEELING	_____	_____
	SHELF NOT INSTALLED AT CORNER CABINET AND CHIP AT GABLE BELOW.	_____	_____
	INSPECT CAULK LEFT AT LOWER LEFT SIDE OF DW PANEL.	_____	_____
	ADJUST CABINETS THROUGHOUT.	_____	_____

**FOYER/HALL**

NOTE:	ADJUST ACCESS PANEL INSIDE CLOSET.	_____	_____
	ADJUST FURNACE COVER CANNOT CLOSE	_____	_____
	ADJUST SLIDING DOOR.	_____	_____
WINDOWS	REMOVE DEBITS OFF SLIDING GLASS.	_____	_____

**MASTER ENSUITE BATH**

NOTE:	SCRATCH ON SHOWER GLASS DOOR.	_____	_____
	DO NOT INSTALL BATHROOM ACCESSORIES ONLY SUPPLY.	_____	_____
VANITY CABINETS	NO HANDLES INSTALLED AT BANK OF DRAWERS.	_____	_____
	REMOVE PAINT OFF INTERIOR LEFT CABINET DOORS FROM PAINTED FRONT OF CABINET.	_____	_____
ELECTRICAL/LIGHTING	ADJUST LIGHT NOT FLUSH WITH WALL	_____	_____

**MAIN BATHROOM**

NOTE:	REPLAC CEILING FAN DENTED.	_____	_____
VANITY CABINETS	CHIP AT BOTTOM GABLE BELOW SINK AND LEFT DOOR INSIDE.	_____	_____

**BEDROOM #2**

NOTE:	SCRATCH ON SLIDING DOORB	_____	_____
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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.

Craig BUJARSKY

Purchaser's Name (print)

A handwritten signature in black ink, appearing to read "Nancy Bujarsky".

Purchaser's Signature

Nancy HENRIQUES BUJARSKY

Purchaser's Name (print)

Designate's Name (print)

Date (YYYY/MM/DD)

Designate's Signature

2023/10/16

Gisella Fiore

Inspector's Name (print)

October 16, 2023

Purchaser's Signature

A handwritten signature in black ink, appearing to read "Gisella Fiore".

Inspector's Signature