



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

**Work Order**

FR Sept. 20/24.  
9AM

**Closing Date:** 17Aug23  
**Address:** 1499 Harker st.  
Innisfil, Ontario L8H 1X1  
**Location:** Belle Aire Shores - Phase: 3 - Lot: 345W  
**Today's Date:** 16Sep24  
**Contact(s):** Paola Migliozi - Cell: (647) 444-7451  
William Hart - Home: (416) 844-7134 - (Harkerstreet@hotmail.com)  
**Email:** Harkerstreet@hotmail.com

**Company:** Icon Plumbing & Heating  
**Attention:**  
**Telephone:** (647) 526-0027  
**Fax:**

NEW FAUCET  
6400

**Please Complete the following items:**

DAI	Type	Issue	Appt. Date/Time	Notes
178776	Interval	Powder Room- General- As per homewoner Power room faucet installed defective- Replace- sink stopper not working as well		stopper was bent. upon first installation go

Date Completed: \_\_\_\_\_

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

Date Completed: Sept 20/24

Trade &/or Service Tech. NEAL

Signature: [Signature]

Print Name: William Hart

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**



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**Work Order**

*Handwritten initials: FR and AM*

**Closing Date:** 12Sep23  
**Address:** 1117 Cole Street  
Innisfil, ON  
**Location:** Belle Aire Shores - Phase: 3 - Lot: 331W  
**Today's Date:** 16Sep24  
**Contact(s):** Yashdeep S. Shinde - Home: (416) 518-1982 - (yashdeepshinde1@hotmail.com)  
Dipali Yashdeep Shinde - Cell: (647) 408-9623 - (dipaliyshinde1@gmail.com)  
**Email:** yashdeepshinde1@hotmail.com

**Company:** Icon Plumbing & Heating  
**Attention:**  
**Telephone:** (647) 526-0027  
**Fax:**

**Please Complete the following items:**

DAI	Type	Issue		Appt. Date/Time	Notes
178803	1 Year	Exterior- General- External water tap, twists while turning and difficult to close/open. Was reported in summer, was partially worked on			

Date Completed: \_\_\_\_\_

Homeowner Signature: *Dipali Shinde*

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

Date Completed: \_\_\_\_\_

**Trade &/or Service Tech.**

Signature: *NEAL*

Print Name: *SEPT 20*

*100%*

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.

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