Enrollment:

Purchaser Name: KAMIL FESZAK

Phone Res: (416) 937-1999 Phone Bus: (647) 870-3121 Closing Date: April 30, 2025 Inspector: Gisella Fiore



Vendor / Builder:

Project: Zancor Oakville Ltd.

Lot / Phase: 622 / 1

Plan:

Address: 2450 Old Bronte Road, Suite 622

Municiaplity:

Inspection Date: April 17, 2025

Page 1 of 2 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

GENERAL COMM	ENTS	
NOTE:	CRACK ABOVE CABINETS AND MICROWAVE	
KITCHEN		
NOTE:	SMALL CHIP AT UPPER SHELF RIGHT OF M/C	
MASTER BEDRO	ОМ	
NOTE:	ADJUST WINDOW NOT LOCKING	
	REMOVE PAINT OFF WINDOW. AND REMOVE PAINT AT SPRINKLER CAP IN LIVING ROOM	
	SVC TOUCH UP CEILING AT LIGHT.	

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Page 2 of 2

A REFERENCE FOR FUTURE WARRANT	TY REQUESTS. signate someone to conduct the PDI in the	HOME'S CONDITION BEFORE THE PURCHASE eir place should ensure they provide written auth	ER TAKES POSSESSION IT WILL BE USED AS ority to the vendor/builder authorizing the		
I have inspected my new home and I agree that the description of the items listed on this form are accurate.					
KAMIL FESZAK	1				
MAIVIIL FESZAK					
Purchaser's Name (print)	Purchaser's Signature	Purchaser's Name (print)	Purchaser's Signature		
		Gisella Fiore	She		
Designate's Name (print)	Designate's Signature	Inspector's Name (print)	Inspector's Signature		
Date (YYYY/MM/DD)	2025/04/17	April 17, 2025			