Enrollment: 447

Purchaser Name: Annette Genovese

Phone Res: (416) 892-3645

Phone Bus:

Inspector: Gisella Fiore

Closing Date: June 18, 2025

HOMES

Vendor / Builder:

Project: Zancor Homes (King Cort) Ltd.

Lot / Phase: 447 / 1

Plan:

Address: 2075 King Road, Unit 447

Municiaplity:

Inspection Date: June 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

| LAUNDRY ROOM        |  |  |  |
|---------------------|--|--|--|
| NOTE:               | LAUNDRY SINK NOT INSTALLED   |  |  |
|                     | INSTALL SIDE SPLASH AT LAUNDRY SINK  |  |  |
|                     | MISSING GROUT AT SIDE SPLASH AT FLOOR LINE   |  |  |
| MASTER BEDROOM      |  |  |  |
| NOTE:               | DO NOT INSTALL WIRE SHELVING THROUGHOUT CLOSETS AS PER HOMEOWNER REQUEST                               |  |  |
| MASTER ENSUITE BATH |  |  |  |
| NOTE:               | SHOWER GLASS DOOR NOT INSTALLED  |  |  |
| Note                |  |  |  |
| =                   | INSTALL MIRRORS THROUGHOUT   |  |  |
| KITCHEN             |  |  |  |
| NOTE:               | HOODFAN NOT INSTALLED & DISHWASHER NOT CONNECTED   |  |  |
|                     | FRIDGE KICKPLATE NOT INSTALLED AND PURCHASER REQUESTING DISHWASHER KICKPLATE TO MATCH OTHER KICKPLATES |  |  |
|                     | HARDWARE NOT INSTALLED IN ALL UPPERS   |  |  |
|                     | ADJUST DOOR ON ISLAND RIGHT SIDE AND ADJUST LOWER RIGHT CABINET IN SERVERY                             |  |  |
|                     | VALANCE LIGHTING NOT TURNING ON IN KITCHEN AND SERVERY   |  |  |
|                     | INSTALL BACKSPLASH SLAB  |  |  |
|                     | INCORRECT KITCHEN FAUCET INSTALLED   |  |  |
|                     | REMOVE PENCIL MARKS OFF OF FREEZER PANEL WHERE HANDLE INSTALLED  |  |  |
|                     | 3RD PLANK RIGHT SIDE OF ISLAND SCRATCHED   |  |  |
|                     | EXTEND LOWER SHELF INSIDE CABINET IN KITCHEN AND SERVERY   |  |  |
| BEDROOM #2          |  |  |  |
| NOTE:               | ELECTRICAL PANEL STICKER MISSING AND ADJUST DOOR SQUEAKING   |  |  |
|                     |  |  |  |

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| MAIN BATHROOM |   |
|---------------|---|
| NOTE:         | DO NOT INSTALL BATHROOM ACCESSORIES IN MAIN BATH AND ENSUITE AS PER HOMEOWNER REQUEST |
| LIVING ROOM   |   |
| -             | 5 PLANKS INFRONT OF FIREPLACE SCRATCHED   |

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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. Annette Genovese 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 2025/06/17 June 17, 2025 Date (YYYY/MM/DD)