Enrollment: 432

Purchaser Name: YOGAVENTHINY KATHIRGAMANATHAN

KALAICHELVI PERAMPALAM

Phone Res: (416) 459-2728

Phone Bus: (905) 251-3532 Closing Date: July 15, 2025 Inspector: Gisella Fiore



Vendor / Builder:

Project: Zancor Homes (King Cort) Ltd.

Lot / Phase: 432 / 1

Plan:

Address: 2075 King Road, Unit 432

Municiaplity:

Inspection Date: July 09, 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

KITCHEN		
CABINETS	CHIP AT BOTTOM GABLE BELOW SINK 2) CHIP AT 1 AND 2 BANK OF DRAWERS	 
MASTER ENSUITE BATH	1	
TOILET	ADJUST TOILET SEAT	 
NOTE:	INSTAL BATH ACCESSORIES DON'T INSTAL TP HOLDER IN MASTER	 
Note		
*	PATIO DOOR NOT LOCKING 2) WINDOW MULLIN IN MASTER DAMAGED	 

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Page 2 of 2

A REFERENCE FOR FUTURE WARRANTY	REQUESTS.	E'S CONDITION BEFORE THE PURCHASER T ce should ensure they provide written authority	
I have inspected my new home and I agree	that the description of the items listed on this	s form are accurate.	
YOGAVENTHINY KATHIRGAMANATHAN		KALAICHELVI PERAMPALAM	
Purchaser's Name (print)	Purchaser's Signature	Purchaser's Name (print)	Purchaser's Signature
		Gisella Fiore	AD
Designate's Name (print)	Designate's Signature	Inspector's Name (print)	Inspector's Signature
Date (YYYY/MM/DD)	2025/07/09	July 09, 2025	