SITE: _____

LOT #: _____

11 MONTH WARRANTY REPORT FORM

NAME: _____

ADDRESS: _____

POSTAL CODE: _____ CLOSING DATE: _____ PHASE #:_____

PHONE #'S: Home:_____ Work:_____

PREFFERED DATES FOR SERVICE (MON TO FRI): _____

Please review your Home Owner Manual prior to reporting any deficiency regarding warranty coverage. All service requests must be in writing. Only this form must be used to notify Townwood Homes of warranty items, with the exception of emergency situations. Mail or fax this form to our Head Office. No forms or letters will be accepted by our site office. We will contact you to set up a service / inspection appointment. Service appointments are available from Mon.-Fri. from 8:00 a.m. until 5:00 p.m.

WARRANTY SERVICE REQUESTED	**DATE COMPLETED**

Homeowner Signature: _____ Dated:_____

(Confirms completion of warrantable deficiencies) Please make a copy of this and keep for your records. Please be aware that if you requested for the year-end drywall repairs to be completed in your home, Townwood Homes will not be held responsible for re-decorating / re-painting of these repairs.