# 30-Day Warranty Service Request

**Name:**_____ **Today's Date:** _____
**Address:** _____
**Community:** _____ **Lot:** _____**Closing Date:** _____
**Home:** _____ **Cell:** _____**Work:** _____
**Email Address** _____

*For efficient operations, our warranty service system is based on your written report of non-emergency warrantable items. Please use this form to notify us of warranty items via fax to 407-529-3105 or email to customercare@parksquarehomes.com. We will contact you to schedule an appointment with a service technician.*

| Service Requested | Warrantable | H/O Maintenance | Date Completed |
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Subcontractors handling requests are scheduled between 8 am and 4 pm Monday thru Friday. When would it be most convenient to you to schedule the appointment(s)? Date and Time: _____

_____ _____
*Homeowner signature* *Date*

The items covered under the Park Square Homes Warranty have been corrected to my satisfaction.

_____ _____
*Technician signature* *Date*