



Year-End Form

**TO NOTIFY TARION OF OUTSTANDING WARRANTY ITEMS, COMPLETE AND SUBMIT THIS FORM
IN THE FINAL 30 DAYS OF THE FIRST YEAR OF POSSESSION OF YOUR HOME.
YOU MAY SUBMIT ONLY ONE YEAR-END FORM.**

Submit this Form to Tarion Warranty Corporation, located at 5160 Yonge Street, 12th Floor, Toronto, Ontario M2N 6L9, in person, by mail or courier, or by fax to 1-877-664-9710. See your *Homeowner Information Package* for details about submitting this Form. Send a copy of the completed Form to your Builder and keep a copy for yourself. Please print all information.

Home Identification Information (Refer to your Certificate of Completion and Possession to complete this box.)

<input style="width: 100%; height: 25px;" type="text"/> / <input style="width: 100%; height: 25px;" type="text"/> / <input style="width: 100%; height: 25px;" type="text"/> Date of Possession (YYYY/MM/DD)	<input style="width: 100%; height: 25px;" type="text"/> Vendor/Builder #	<input style="width: 100%; height: 25px;" type="text"/> Enrolment #
Civic Address (address of your home under warranty):		
<input style="width: 100%; height: 25px;" type="text"/> Street Number	<input style="width: 100%; height: 25px;" type="text"/> Street Name	<input style="width: 100%; height: 25px;" type="text"/> Condo Suite # (if applicable)
<input style="width: 100%; height: 25px;" type="text"/> City/Town	<input style="width: 100%; height: 25px;" type="text"/> Postal Code	<input style="width: 100%; height: 25px;" type="text"/> Lot #
Contact Information of Homeowner(s):		Project/Subdivision Name
<input style="width: 100%; height: 25px;" type="text"/> Homeowner's Name	<input style="width: 100%; height: 25px;" type="text"/> Homeowner's Name (if applicable)	
<input style="width: 100%; height: 25px;" type="text"/> () - Daytime Phone Number	<input style="width: 100%; height: 25px;" type="text"/> () - Daytime Phone Number	
<input style="width: 100%; height: 25px;" type="text"/> () - Evening Phone Number	<input style="width: 100%; height: 25px;" type="text"/> () - Evening Phone Number	
<input style="width: 100%; height: 25px;" type="text"/> Fax Number	<input style="width: 100%; height: 25px;" type="text"/> Fax Number	
<input style="width: 100%; height: 25px;" type="text"/> Email Address	<input style="width: 100%; height: 25px;" type="text"/> Email Address	
<input type="checkbox"/> Check this box if you are not the original registered homeowner.	<input type="checkbox"/> Check this box if you are not the original registered homeowner.	

Mailing Address for Correspondence to Homeowner (if different from Civic Address above)

<input style="width: 100%; height: 25px;" type="text"/> Street Number	<input style="width: 100%; height: 25px;" type="text"/> Street Name	<input style="width: 100%; height: 25px;" type="text"/> Condo Suite # (if applicable)
<input style="width: 100%; height: 25px;" type="text"/> City/Town	<input style="width: 100%; height: 25px;" type="text"/> Province	<input style="width: 100%; height: 25px;" type="text"/> Postal Code

For additional information about new home warranty protection, visit our website at www.tarion.com or call us at 1-877-9TARION (1-877-982-7466).

