

**TO NOTIFY TARION OF OUTSTANDING WARRANTY ITEMS, COMPLETE AND SUBMIT THIS FORM BEFORE THE END OF THE FIRST 30 DAYS OF POSSESSION OF YOUR HOME.**

**YOU MAY SUBMIT ONLY ONE 30-DAY FORM.**

You may submit an online version of this form through Tarion's homeowner service called MyHome. Register today at [www.tarion.com](http://www.tarion.com). You may also submit this form to Tarion Warranty Corporation, located at 5160 Yonge Street, 12th Floor, Toronto, Ontario M2N 6L9, in person, by mail or courier. Send a copy of this 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"/> 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 #
<b>Civic Address</b> (address of your home under warranty):		
<input style="width: 15%; height: 25px;" type="text"/> Street Number	<input style="width: 55%; height: 25px;" type="text"/> Street Name	<input style="width: 20%; height: 25px;" type="text"/> Condo Suite # (if applicable)
<input style="width: 30%; height: 25px;" type="text"/> City/Town	<input style="width: 15%; height: 25px;" type="text"/> Postal Code	<input style="width: 10%; height: 25px;" type="text"/> Lot #
<b>Contact Information of Homeowner(s):</b>		<input style="width: 100%; height: 25px;" type="text"/> 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)	
(     )     - Daytime Phone Number	(     )     - Daytime Phone Number	
(     )     - Evening Phone Number	(     )     - Evening Phone Number	
(     )     - Fax Number	(     )     - 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: 30%; height: 25px;" type="text"/> City/Town	<input style="width: 15%; height: 25px;" type="text"/> Province	<input style="width: 10%; height: 25px;" type="text"/> Postal Code

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

