

*** * SAMPLE COPY ONLY * ***

**Please note: this is just a copy of the 11-Month Service Request for your information.
An official form will be mailed to your home approximately 9 months after closing.**

**CUSTOMER CARE SERVICE REQUEST
ACKNOWLEDGEMENT FORM
11-MONTH SERVICE REQUEST**

I hereby acknowledge receipt of the 11-month service request. I understand that by submitting this request form, I must provide access to my home between the hours of 7:00am am and 3:00pm, Monday through Friday, for services to be provided. Our Customer Care Department does not work on weekends.

Upon receipt of the service request form, a representative and/or trade partner of LifeStyle Builders & Developers, Inc. will address each item and perform warranty services only on those items covered under the warranty policy. Please use your Residential Warranty Corporation (RWC) Manual as a guide when completing your list as we use the Manual as a guide when determining Customer Care Coverage.

I understand that the warranty period covers twelve months from the date of closing. I understand that if my list is not received before the last business day of the Tenth month, LifeStyle Builders & Developers, Inc. reserves the right to refuse my Customer Care Request.

I understand that in the event it is necessary to have furniture removed to perform a service, it is my responsibility to make sure this is done prior to the arrival of the Customer Care Representative. Neither LifeStyle Builders & Developers, Inc. nor its trade partners will be responsible for moving furniture.

I understand that LifeStyle Builders & Developers, Inc. will perform sheet rock repairs one time during the first year of occupancy as a courtesy. It is the Homeowners responsibility to mark all sheetrock concerns with blue painters tape prior to the repair appointment. The Sheetrock technician will only repair the marked areas. LifeStyle Builders & Developers, Inc. will paint said repairs with specified builder colors. LifeStyle Builders & Developers, Inc. will not repaint custom colors or repair wallpaper.

I acknowledge that the person who signs this form will be responsible for coordinating all scheduling with the Customer Care Representative, accepting all repairs and final sign off of this Customer Care Service Request.

HOMEOWNER SIGNATURE

DATE

PRINT