

CERTIFICATE OF POSSESSION

8 YEAR MAJOR STRUCTURAL DEFECTS

LUX BUILDER NUMBER:		BOOGEOGIONI	DATE (D. MA. (I.N.)
			DATE: (Day/Month/Year)//
HOME PHONE:	OTHER:		
NEW HOME ADDRESS:			
CIVIC NUMBER:	STREET NAME:	UN	IT NUMBER (If applicable):
CITY:	PROVINCE:		POSTAL CODE:
BUILDERS INFORMATION:	Builder Name:	Pho	ne:
DRY BASEMENT WRAP: Does the foundation have a dra	inage board installed?	Delta MS Platon	Super Seal
IS THIS A RENTAL?	YES	NO	
constitute warranty coverage u CONDITIONS OF THE LUX W Homeowner Initials X List incomplete items, defects	s or other no warranty items. Attach	HEREBY ACKNOWLEDGES	
obtained an "Occupancy certific 2. To effect warranty cov Failure of the homeowner(s) to	cate" from the local inspection authority /erage, this form must be fully comple provide Lux with a copy of this comple	y confirming building inspection eted and sent to Lux Wai eted possession within the red	n date. Both the Builder and Purchaser have ons have been approved and completed. rranty within 7 days of possession quired time frame, may result in no warranty tificate will be sent to the homeowner (s).
SIGNATURE OF BUILDER:			DATE:
SIGNATURE OF PURCHASER(S):			DATE:
Trade Names:			
	Phone:	Siding:	Phone:
Roofer:	Phone:	Plumber:	Phone:

Please Send to Lux Home Warranty by:

Email: info@luxwarranty.com

Mail: PO Box 27046, Dieppe, NB E1A 6V3

Phone: (506) 854-4432 Toll Free: (877) 854-4432

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