

## **ONE YEAR LIST**

TO BE COMPLETED NO LA	TER THAN:		<del></del>
HOMEOWNER(S) NAME:	CTDEET ADD	NDECC.	
UNIT #			
Email contact:	Work/Cell Phone:		
Preferred method of contact		☐ Phone	
Please send completed form by	y mail, fax or email	to:	
Lewis Builders Devel 54 Sawyer Avenue Atkinson, NH 03811	lopment, Inc.		
Attn: Warranty			
	3-362-4936 <u>rranty@lewisbuilder</u>	s.com	
THE FOLLOWING ITEMS	NEED ATTENTION	ON:	
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