



10 MONTH SERVICE REQUEST

Please submit to Feise Select Homes no later than _____.

PLEASE USE THIS FORM TO REPORT ANY WARRANTABLE ITEMS NEEDING ATTENTION AT THE END OF 10 MONTHS FROM DATE OF CLOSING.

DATE _____ COMMUNITY _____

LIST REPAIRS NEEDED:

ONLY LIST THOSE ITEMS THAT ARE THE RESPONSIBILITY OF THE BUILDER AND ARE COVERED BY THE HOMR OWNERS WARRANTY DOCUMENTS. ANY OTHER ITEMS WILL NOT BE CONSIDERED FOR REPAIRS.

NAME _____ CONTACT PHONE #1 _____

ADDRESS _____ CONTACT PHONE #2 _____

LOT # _____ CONTACT PHONE #3 _____

EMAIL FOR WARRANTY COMMUNICATION _____

Please mail to: Feise Select Homes
Email: teamstewartstl@gmail.com