



15 Oland Cres., Halifax, NS B3S 1C6  
Phone: 902-450-9000 or 1-800-320-9880  
Fax : 902-450-5454 Email [info@ahwp.org](mailto:info@ahwp.org)  
Website: [www.ahwp.org](http://www.ahwp.org)

R: 01-0424

H: 129642

**7 Year**  
**CERTIFICATE OF POSSESSION**

(This is not a Warranty Certificate)

**Builder Name:** Scotian Homes  
**New Home Address:** Lot 1A Green St. Lunenburg NS  
**Lot:** 1A **Type of Dwelling:** Single Detached **Job #:** 601

**THE BUILDER AND HOMEOWNER CERTIFIES TO THE ATLANTIC HOME WARRANTY (AHW) THAT:**

1. The Home described on this Certificate of Possession was substantially completed by the Builder.
2. The Home was inspected by us and possession was taken on the date shown. The Atlantic Home Warranty coverage is effective from this Date of Possession.

**SUB-TRADE LIST - BUILDER TO COMPLETE:**

FOUNDATION	WINDOWS & DOORS
ELECTRICAL	FRAMING
SIDING	PLUMBING
DRYWALL	VENTILATION
ROOFING	OTHER
FLOORING	

**HOMEOWNER & BUILDER TO COMPLETE - UNFINISHED CONSTRUCTION ITEMS:**

THE WARRANTY PROGRAM DOES NOT GUARANTEE COMPLETION OF THE CONSTRUCTION CONTRACT.  
LIST BELOW ALL ITEMS OUTSTANDING AT THE DATE OF POSSESSION

**HOMEOWNER & BUILDER TO COMPLETE:**

**TYPE OF WARRANTY** FULL ☒ PARTIAL ☐

IF PARTIAL, DETAIL ITEMS NOT COVERED BY WARRANTY, INCLUDING MATERIAL & WORKMANSHIP SUPPLIED BY THE HOMEOWNER

**PLEASE NOTE:** The Program does not cover defects in materials, appliances, design and workmanship supplied by the Homeowner, and any resultant damage caused to the Home.

PLEASE PRINT CLEARLY

**HOMEOWNER(S):** Pat and Chuck Crookrock

**DATE OF POSSESSION:** 6 September 2012 **PHONE:**

**MAILING ADDRESS:** 297 Green St. **POSTAL CODE:** B1L 2C6

We agree that all the information provided on this form may be used and disclosed by AHW for the administration of AHW including for all warranty matters and claims, and for advising financial institutions, if requested, whether the dwelling is covered by an AHW warranty. AHW will provide a copy of its Privacy Policy upon request.

Builder Signature

Date

Homeowner Signature

Date

**IMPORTANT NOTE TO ALL PARTIES:**

ONE SIGNED COPY OF THIS CERTIFICATE OF POSSESSION MUST BE RETURNED TO AHW TO EFFECT THE ISSUANCE OF THE WARRANTY CERTIFICATE.

To Purchaser





## 7 Year Limited Warranty Certificate

**Date of Possession/:** September 6, 2012

**Date de possession**

**Warranty Expires:** September 5, 2019

**Address:** 287 Green St., R. R. 3  
Lunenburg, NS  
B0J 2C0

**Bldr Mbr/Mbre Const.:** Scotian Homes

**Address:** 264 Hwy #2  
Enfield, N. S.  
B2T 1C9, Attn: Suzanne Bona  
902-883-2266

**Found. Mbr/Mbre de fond.:** Not Applicable  
**Address:**

**WARRANTY NUMBERS/Numéros de Garantie**  
R01-0424 H129642

**Type/Genre:** Single Detached  
**of dwelling/de résidence**  
**Lot:** -1A

**Partial Warranty Items (if any) are**  
**listed below./Les items partiels de garantie (si tel est le cas) sont**  
**identifiés ci-dessous.**

A handwritten signature in dark ink, appearing to be "Suzanne Bona", written over a horizontal line.

**Per** \_\_\_\_\_ (Director)

A handwritten signature in dark ink, appearing to be "Suzanne Bona", written over a horizontal line.

**Per** \_\_\_\_\_ (Director)

15 Oland Crescent, Halifax, B3S 1C6 ~ 1-800-320-9880/(902) 450-9000