

*WELCOME TO*

*1057 Suburban Court  
West Guilford, ON*



*Information Package*

# *Improvements*

## *And upgrades since 2019*

1057 Suburban Court, *West Guilford, ON*

- Workshop Building added extra living & work space
- She Shed
- Fenced Garden Beds
- New Landscaping
- Water Access and expanded dock with lighting 2024
- All Light Fixtures/ceiling fans 2021
- Main Floor & 2nd floor-new paint and decor/barn doors 2021
- New toilets in main floor powder room and ensuite
- Upgraded Main Bath Vanity & Vanity Top 2021
- New countertop in Main floor powder room 2021
- Lighting in Kitchen and Bathrooms upgraded 2021
- Quartzite Countertops in Kitchen 2021
- Extended Counter/Bar seating 2021
- Under Cabinet Lighting 2021
- Upgraded Kitchen Design 2021
- New Fridge/Stove & Range Hood 2021
- New exterior light fixtures
- Lighting on deck
- Flooring replaced in front hall, powder room, mudroom & back patio doorway
- Redesigned mudroom
- Central Air
- Freshly stained deck and front porch
- Decorative Arbour at hedge
- Ceiling Fans in all Bedrooms
- Wireless Propane Tank Monitor-auto refill at 25%
- Upgraded Oil Tank-2017-Our consumption from Dec.2023 to Oct. 2024 was \$2131.20 with 1/2 tank remaining
- New shingles 2019
- New Central Air Conditioning 2021-Kegel
- New Hot Tub cover 2021



# *Annual Costs*

1057 Suburban Court - *West Guilford, ON*

- Upgraded Oil Tank 2017
- Our consumption from Dec 2023 to Oct 2024 = \$2131.20  
(At 10/04/2024 there is 1/2 tank remaining)
- New shingles 2019
- New Water Pump 2018
- New Heated Line 2013
- New Central Air Conditioning 2021- Kegel Heating
- Wireless Monitor for Propane Tank 2022 = \$141.00 Annually
- Propane Supplier- Budget-Average Monthly Cost = \$128.00
- Propane Tank Rental = \$141.00 per year
- Hot Water Tank-Owned
- Hydro One = Average cost \$239.00/mth
- Satellite/Internet Provider- Bell
- Septic Tank Pumped by Total Site Services  
(recommended every 3 years) Last Pumped on May 23/2024
- 200 Amp Service
- Current Insurance Broker – The Personal
- Property Tax Bill = \$2,614.23 (2024)







# Schedule "D"

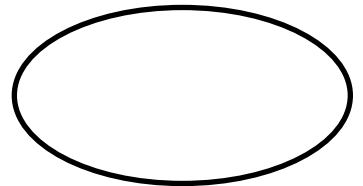
1057 Suburban Court, West Guilford, ON

## INCLUSIONS

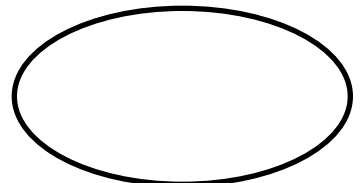
- Microwave, Fridge/Stove & Range Hood in Kitchen
- Microwave in workshop
- Refrigerator in Pantry
- Pegboard Storage in Pantry
- Dishwasher
- Washer/Dryer
- Shelving in Kitchen
- Shelves and Mirrors in Bathrooms
- Shelves and Barn Doors in Bedrooms
- Propane Stove in Living Room (with remote)
- Exterior Propane Lines, BBQ and Fire table
- TV in Workshop
- Wood burning Stove in Workshop
- All window coverings
- Central Vac
- All light fixtures and ceiling fans
- Hot Tub (New cover in 2021)
- Garden Beds
- Bakers Rack in Garden Area
- Rain Barrel
- Exterior String Lighting

## EXCLUSIONS

- Balance of House/Garage/Workshop
- Bar Fridge in Workshop - All Tools
- Furniture in She Shed
- Carpet in She Shed
- Lawn Tractor
- Snow Blower



Buyers Initials



Seller's Initials



# Sewage Installation Report

1057 Suburban Court, West Guilford



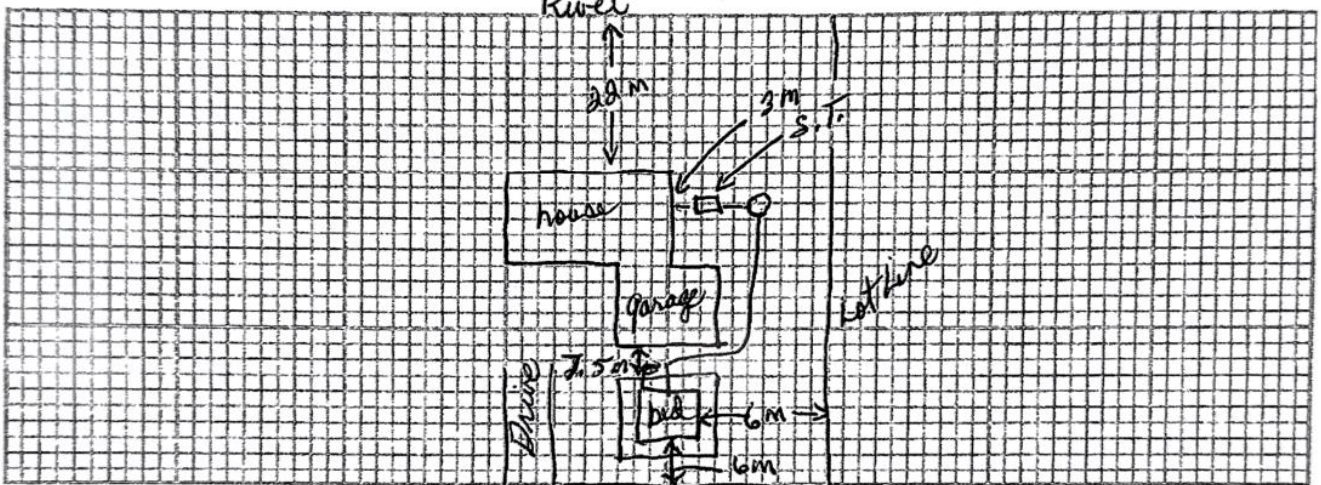
## SEWAGE SYSTEM INSTALLATION REPORT

Gu-3-02  
FILE NUMBER

### REPORT

INSTALLED BY: Blair Sand & Gravel DATE: April 17/03  
 Work authorized by Site Inspection Report for a sewage system has been satisfactorily completed and includes:  
 - Septic Tank/Holding Tank of working capacity of 3600 litres constructed of steel/concrete/fibreglass, Manufacturer Brooklyn  
 - Distribution Pipe. Type PVC Absorption Trench System  N/A  
 Filter Bed System  Filter Bed Area 24 sq. m. Contact Area 24 sq. m.  
 Total 18.3 Lineal Metres in 4 runs of 4.6 metres and fed by gravity , Siphon , or Pump  Myers 1/3 HP + alarm  
 - Size of System based on 3 bedrooms and/or 20 fixture units Commercial details \_\_\_\_\_  
 Area of Building: 200 m<sup>2</sup>  
 - Other: \_\_\_\_\_

Actual location and orientation of components of sewage system are shown hereunder  or as outlined on the Site Inspection Report For A Sewage System form



The following work remains to be completed Backfill system and sod or seed , Stabilize all sloped surfaces , Finish grading to shed run-off and divert water around leaching bed . Other: \_\_\_\_\_

### INSTALLATION REPORT

Under the Building Code Act and regulations and subject to the limitations thereof, a permit is hereby issued to R. & W. Lissen  
 For the use and operation of the Class 4 Sewage System Installed / Altered under Site Inspection Report # Gu-3-02  
 Such system being located on Lot 6 Conc. 4 Plan 19R-5229 Sub. lot 5 Roll No. 040-69112  
 Township / County / City Guilford Emergency # 911 \_\_\_\_\_  
 Inspected and Recommended by B. Colpitts  
 (Appointed Inspector - Part 8)  
 Date April 17/03 issued [Signature]  
 (Designated Sewage Inspector - Part 8)

NOTE: No change can be made to any building(s) or structures in connection with which this sewage system is used, if the operation or effectiveness of the sewage system will be affected by the change, unless a Site Inspection Report is obtained.

# Septic Pumping Invoice

1057 Suburban Court, West Guilford



**TOTAL**  
Site Services Inc.

6522 Gelert Road, Haliburton, Ontario  
705-457-9558  
Send E-transfers to [accounting@totalsiteservices.ca](mailto:accounting@totalsiteservices.ca)  
HST# 848914586 RT0001

Invoice Number : 1281  
Issue Date : 24 May 2024  
**DUE UPON RECEIPT**

To : Rome, David  
Work carried out at: 1057 Suburban Ct, Dysart and Others,  
ON K0M 1S0, Canada  
Date work was done: 05/23/2024

This invoice is now past due, please call our office to make payment. Thank you

| Item          | Description             | Unit Price | Quantity | Tax    | Total      |
|---------------|-------------------------|------------|----------|--------|------------|
| ST Pump Out > | Pump Out<br>Septic Tank | 325.00 CAD | 1.00     | 13.00% | 325.00 CAD |

**Subtotal** 325.00 CAD

**Tax** 42.25 CAD

**Total Balance** 367.25 CAD

**Payment Method**

**Remaining Balance**

# Furnace & Hot Water Tank Inspection Report

## FUEL OIL DISTRIBUTOR INSPECTIONS APPLIANCES – COMPREHENSIVE

REPORT NUMBER:

123505

OWNER / OPERATOR: POD SISSON

LOCATION: 1057 SUBURBAN CRT

TELEPHONE NO. \_\_\_\_\_

OWNER'S ADDRESS (If different from above): \_\_\_\_\_

| Type of Appliance  | 1 <sup>st</sup> . APPLIANCE  | 2 <sup>nd</sup> . APPLIANCE  |
|--|--|--|
| Type of Appliance  | FAF  | HWHT   |
| Manufacturer   | ICF  | BROCK  |
| Model  | CLR105   | CM52-II  |
| Date of Manufacture or Age in Years  | —  | 2018   |
| Size (BTU/Hr)  | 97,800   | 91,000   |
| Serial No.   | 266585   | SD11815300   |
| 1. Is the appliance approved?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 2. Is the appliance installed in accordance with the fuel oil code?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 3. Is the appliance being used in accordance with its approval?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 4. Is the appliance venting installed in accordance with the fuel oil code?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 5. Is the venting system free of defects, debris or corrosion  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 6. Is the vent sized properly?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 7. Is proper combustion and ventilation air openings installed?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 8. Is the installation free of indications of heat exchanger cracks, defects in the refractory, pot and/or heat shields?         | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 9. Are all limits and safety controls properly installed?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 10. Is the appliance installed with appropriate clearances from combustibles?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 11. Are the results of combustion analysis acceptable?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 12. If required, is there a proper chimney cleanout?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 13. Is the chimney properly lined?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 14. Is the vent liner fitted with proper flashing, cap and base T?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 15. If there is a sidewall vent attached to the appliance is it installed according to code and the manufacturer's instructions? | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |
| NOTES: (any "No" answers must be explained in this section and the affected equipment repaired, replaced or tagged).             |  |  |

**COMMENTS:**  
\_\_\_\_\_

Technician's Name (please print clearly): KEN BERRY

Telephone: \_\_\_\_\_

Technician's Signature: [Signature]

Certificate No.: 00750503

Date: 1/21/18



# Oil Tank Inspection Report



## FUEL OIL DISTRIBUTOR INSPECTIONS

ABOVEGROUND TANKS  INSIDE  OUTSIDE

REPORT NUMBER:  
C-1005172

www.coha-ontario.ca

Note: Inspection is limited to external observation of tanks and components in their operating position.

|  | 1st. TANK  | 2nd. TANK   |
|--|--|---|
| Type of Tank i.e. ULC-S602   | ULL S602-07  |   |
| Manufacturer   | GRANBY   |   |
| Date of Manufacture or Age in Years  | 08-2017  |   |
| Serial No.   | A6666370   |   |
| 1. Is the tank approved for its present use?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 2. Does the tank appear to have been installed in accordance with the fuel oil code, the certification document and the manufacturer's instructions? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 3. Are the tank vent and fill pipes properly installed and terminated?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 4. Is the tank equipped with a proper fill cap?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 5. Is the tank equipped with a proper gauge and overflow protection device (whistle)?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 6. Is the tank properly supported on a firm base?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 7. Is the tank support system in good condition, non-combustible and stable?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 8. If two tanks are joined, are they installed on a common slab?   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 9. If two tanks are bottom connected, are they connected with 2 in. pipe?  | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 10. Is the system free of leaks or any signs of weepage?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 11. Is the tank and piping painted or coated to prevent external corrosion?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 12. Are burner supply/return lines free of compression fittings?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 13. Are burner supply/return lines installed above grade and protected or underground and chased?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 14. Are burner supply/return lines installed to code?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 15. Is an approved shut-off valve installed?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 16. Is an approved filter installed?   | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 17. Is the fill/vent pipe steel or galvanized construction?  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                              | <input type="checkbox"/> Yes <input type="checkbox"/> No                              |
| 18. Is the tank located at least 2 feet from the appliance or is the tank protected from the appliance by a fire rated wall. (for inside tank only)  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 19. If required is the tank protected from vehicle damage?   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| 20. If required is the tank (over 2500L) protected with appropriate secondary containment?   | <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |
| NOTES: (any "No" answers must be explained in this section and the affected equipment repaired, replaced or tagged)                                  |  |   |

COMMENTS:

Technician's Signature: [Signature] Certificate No.: 000179778 Date: OCT 3 2017

*WELL WATER - Test*  
*1057 Suburban Court, West Guilford, ON*

Coming soon

# Location Map

1057 Suburban Court, West Guilford, ON





# Area Map

1057 Suburban Court, West Guilford, ON



# *Haliburton County Location*

*1057 Suburban Court, West Guilford, ON*

