



PF-225

# WARRANTY REQUEST FORM

DATE: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ARCHITECT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

GENERAL CONTRACTOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

CERTIFICATE NO: \_\_\_\_\_

TYPE OF WARRANTY REQUESTED: \_\_\_\_\_

REQUESTED BY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

<u>TECHNICAL DATA</u>	
APPLICATOR:	_____
DISTRIBUTOR:	_____
ADDRESS:	_____
CITY/ST/ZIP:	_____
PHONE:	_____
FINISHE(S):	_____
SUBSTRATE:	_____
SQ FT:	_____
START DATE:	_____
COMPLETION:	_____
<b>PROJECT PHOTOS?</b>	
YES	<input type="checkbox"/>
NO	<input type="checkbox"/>

<b>FOR OFFICE USE ONLY:</b>		
APPROVED BY: _____	DATE: _____	SIGNATURE: _____