



REQUEST for ASSISTANCE WITH ORDERED PRODUCT

CONTACT INFO

Name			
Street	City	State	Zip
Email address			
Phone	Best time to contact:	Preferred method of contact	

Address where product is installed if different from above

Name			
Street	City	State	Zip

INSTALLATION INFO

Who performed the installation (circle)	Contractor/Installer	Do it Yourselfer
When was it installed:		

FINISH / WOOD SURFACE PROTECTION INFO

Who finished the product?	Contractor/Installer	Do it Yourselfer	Factory finish
When was it originally finished?	Finish material (if not factory applied):		
Coats of original finish	Was the product refinished? If yes, approximate date(s)		

OBSERVATIONS / PHOTOS

Explanation of the observed problem:
When was it first observed?
What are you requesting?

*******ADDITIONAL INFORMATION REQUIRED*******

- (1)** Emailed photos showing the following are required to process your request Front view showing the entire product, Back view showing the entire product. Include closer up photos of problem.
- (2) DEALERS:** CUSTOM ORDER WARRANTY REQUESTS Purchase Orders # _____ STOCK ORDER WARRANTY REQUESTS - Attach copy of sales receipt
- (3) NON-DEALERS:** Attach copy of sales receipt

*If it is found that the product does not have a defect covered by the warranty, and the product has been inspected by the company and/or contracted party **we will charge an inspection fee** for an onsite inspection that is required or requested. The inspection fee will be between \$75 and \$200 and is contingent upon travel time.*

The above statements and facts are true and correct

Signature: _____ Date: _____

FAX to: 503 925 8910