



# ARMOR COAT

Rev. 10/20

## WARRANTY REQUEST FORM

Warranty Term Requested  3 year  5 year  10 year  15 year  5 year RECOAT

Today's Date: \_\_\_\_\_ Project Start Date: \_\_\_\_\_ Project Completion Date: \_\_\_\_\_

Project Name/Owners Name: \_\_\_\_\_ Building Use: \_\_\_\_\_

Project Address: \_\_\_\_\_ Project Square Footage: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Project Contact Name: \_\_\_\_\_

Owner Address: \_\_\_\_\_ Contact Phone: \_\_\_\_\_

(if different from project)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Is the Deck New/Existing: \_\_\_\_\_ Substrate: \_\_\_\_\_ Condition: \_\_\_\_\_

Is there positive drainage on the roof: \_\_\_\_\_ What is the Pitch in Roof: \_\_\_\_\_

Describe the current condition of the roof: \_\_\_\_\_

Foam Application: Was polyurethane foam applied? \_\_\_\_\_ If yes, how many inches? \_\_\_\_\_

How many lifts to achieve foam thickness? \_\_\_\_\_ Foam density: \_\_\_\_\_

Coating Application: Number of total gallons applied: \_\_\_\_\_ AC product used: \_\_\_\_\_

If more than one coat was applied please list the number of gallons applied per coat:

1<sup>st</sup> Coat: \_\_\_\_\_ 2<sup>nd</sup> Coat: \_\_\_\_\_ 3<sup>rd</sup> Coat: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Qualified Applicator Name: \_\_\_\_\_

By signing below, signer attests to the accuracy of all information given herein and understands that any variations of that information could result in the voiding of any project warranty in its entirety.

Approved Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The intent of these warranties is to offer the building owner protection from leaks caused by product deterioration as a result of normal weathering and aging. These warranties cover product failure only so long as the application meets all requirements for preparation and application. Liability, if any, covers only product replacement sufficient enough to repair affected area to bring said area to a level of normal protection. No warranty, whether expressed or implied is valid unless given in writing by an authorized representative of Armor Coat Roof Coatings, Inc. Please refer to the actual warranty documents to review any limitations or requirements. These *Limited Liability Warranties* are offered at no charge and do not require a third party inspection. They do however require that a warranty request from be filled out by the applicator attesting to the specific application rates as well as other parameters of the job. Warranties issued by Armor Coat Roof Coatings, Inc. are honored to the original building owner at the time of initial application and are non-transferable. Any claim on a warranty must be submitted, in writing, within 15 days of the issue first being noticed and a Warranty Claim Form must be submitted by the property owner or the original applicator/contractor.

## ARMOR COAT ROOF COATINGS, INC.

5238 S. 31<sup>st</sup> Place, Suite 102, Phoenix, AZ 85040 (480) 966-9877 [www.armorcoatroofcoatings.com](http://www.armorcoatroofcoatings.com)