EIFS Warranty Request Form

Date:_____

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Project Name: _____

Project Address: _____

Applicator: ## Distributor:

Name_____   _____

Address: _____   _____

Phone No: _____Lic. No:_____   _____

E-Mail: _____   _____

General Contractor: ## Architect:

Address: _____   _____

Phone No: _____   _____

E-Mail: _____   _____

This warranty is requested for the period of _____ years.   Total sq. footage _____

This warranty is requested based on the information detailed on page two of this request form.

PAGE 2 MUST BE ACCURATELY COMPLETED PRIOR TO THE WARRANTY BEING APPROVED

NOTE: If this is not for a full system please use "COATINGS ONLY" warranty request form.

The undersigned applicator/distributor agrees that the quantities listed are accurate, that the system was applied in accordance with Ultrakote specification details, and the application meets the industry standard of care.

Applicator signature_____Position_____Date_____

Distributor signature_____Position_____Date_____

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Project: _____   Date: _____

Select from the list below the products used in the application. The products used and the amounts used will determine the duration of warranty issued. Accuracy is essential for obtaining the proper warranty.

Material used	Quantity used	Date installed
Moisture Resistive Barrier (Approved Sheet membrane, ex: Tyvek)	_____	_____
Shurgard Roll On SMB	_____	_____
Shrugard Trowel ON SMB	_____	_____
Shurkote Acrylic Adhesive	_____	_____
Approved Drainage Mat	_____	_____
Approved Mechanical Fasteners	_____	_____
Approved EPS Foam Insulation Board (state thickness's used)	_____	_____

Shurkote Base Coats require embedded reinforcing mesh in addition to the EPS Adhesive used.

Shurkote Dry Base EPS Adhesive	_____	_____
Shurkote Wet Base EPS adhesive	_____	_____
4.5 oz. standard mesh	_____	_____
11.0 oz. Medium reinforcing mesh	_____	_____
20.0 oz. high impact mesh with plus one top layer of standard 4.5 oz. mesh	_____	_____
Ultrakote Base Coat Primer	_____	_____
Ultrakote Acrylic Textured Finish Coat (state texture)	_____	_____
Approved Sealant (attach the completed sealant installation card)	_____	_____
Inspection Reports Attached	_____	_____