



WARRANTY REQUEST

10 Year Traditional Stucco System

IMPORTANT NOTICE:

By signing this warranty request, you notify Imasco Minerals Inc. that all the requirements of the Traditional System and its installation instruction, details, and specifications have been fully complied with.

It is the responsibility of the contractor to keep all records of this project including purchase order receipts.

INSTRUCTIONS:

To avoid delay in processing, please be sure to accurately complete all sections of the form. We are not able to proceed with the warranty request until the form is fully completed. After completing the form please return it to IMASCO MINERALS MARKETING so we may update your account. You can return this form by e-mail, fax, or mail.

SEND THE COMPLETED WARRANTY TO THE FOLLOWING ADDRESS:

MAILING ADDRESS:

PROJECT INFORMATION

P.O. #:

DATE:

DEALER:

CONTACT:

CONTRACTOR:

PROJECT NAME:

PROJECT ADDRESS:

OWNER:

COMPLETION DATE:

ARCHITECT:

SIZE: SQ YD / SQ FT:

(PLEASE CIRCLE)

BUILDER / GENERAL CONTRACTOR:

ENVELOPE CONSULTANT:



PRODUCT & COMPONENT INFORMATION

IS THERE A REGISTERED PROFESSIONAL HAVING TAKEN AUTHORITY FOR THE BUILDING ENVELOPE DESIGN & REVIEW? YES NO

IS THIS AN ENGINEERED CAVITY SYSTEM? YES NO

PLEASE INDICATE WHICH OF THE FOLLOWING PRODUCTS WERE USED ON THE PROJECT. INCLUDE A DESCRIPTION WHEN NEEDED.

STRAPPING: TYPE:

PAPER: BRAND: GRADE: # OF LAYERS:

BACKER BOARD: TYPE:

WIRE: TYPE:

BASECOAT: GREATWALL OTHER MANUFACTURER: THICKNESS:

SAND - ASTM C144/ ASTM C897 - SUPPLIER:

ACRYLIC FINISH: **FLEXCOAT ACRYLIC FINISH:** COLOUR: TEXTURE:

PERFECTOR ACRYLIC FINISH: COLOUR: TEXTURE:

EVOLUTION ACRYLIC FINISH: COLOUR: TEXTURE:

SPECIALTY ACRYLIC FINISH: COLOUR: TEXTURE:

CEMENT FINISH: **PREMIX CEMENTICIOUS FINISH:** COLOUR:

ARTISAN CEMENTICIOUS FINISH: COLOUR:

OTHER FINISH: PLEASE SPECIFY:

CUSTOMER'S ACKNOWLEDGMENT

SIGNATURE: DATE:

PRINT NAME: REVIEWED BY:
(IMASCO'S USE ONLY)