



WESTERN COLLOID S.C., Inc

Western Cool Roof Systems

654 East 60th Street, Los Angeles, CA, 90001 (323)-231-8292

Fill Out Form, "Save As" & Email Warranty App. To:

Greg Hlavaty gmh@westerncolloid.com Mob. (760) 525-0884

WARRANTY APPLICATION

Date: _____

Applied By (Contractor Name): _____

(Contractor Address): _____

(Contractor Phone #): _____ FAX # _____ Contact: _____

Name of Building or (Building Use or Type): _____

Building Location (Address): _____

Location Notes (description): _____

Name Of Owner: _____

Owners Address: _____

(Owner Phone #): _____ FAX # _____ Contact: _____

System(s) Specification No.: _____ Number of Squares: _____

List Western Colloid Products and Quantities Used: _____

Warranty Period (5 year, 10 year, ect.): _____ Std.[_] Mat.& Labor** [_] Date of Completion: _____

**Material & Labor requires pre-approval, inspections & fee.

Consultant, or Specifier (if Applicable): _____

Notes: _____
