

Extended Warranty Application

To receive warranty, this document must be completed and sent to info@kretus.com no less than 6 weeks after installation is completed. Include "Warranty Application" in the subject of your email.

CONTACT

Licensed Contractor Name	Company	Email	Phone
Project/Site Name	Client/Point-of-Contact Name	Email	Phone
Project/Site Address	City	State	Zip
CHECKLIST	INICTALL ATION F	AID DATE.	
INSTALLATION START DATE:	INSTALLATION EI	ND DATE:	
COMPLETE AND ATTACH THE FO	DLLOWING DOCUMENTS & PHOTOS	Αī	TTACHED
 3. Copy of receipts for KRETUS® 4. Daily installation/jobsite repo 5. Include the following jobsite posterion Surface preparation On-site application testin Daily mixing station setu 	orts—available at <u>kretus.com/project</u> photos: ng	-planning.	
supplemental information need separate sheet and accompany	vided is accurate and true to the bes ed to accurately and fully disclose ex this document. If any information is f icellation of any warranty provided o	isting conditions mu found to be erroned	ust be listed on a ous or incomplete at
Signature of Licensed Contracto	r D	ate	
Print Name	C	Company/Job Title	