PRE-REGISTRATION FORM INSTRUCTIONS
Extended Material Warranty

- In order to register your project for an Extended Material Warranty, please read and complete Polyguard's Pre-Registration Form.
- A copy of the specification is required and shall accompany the completed form. Please copy or scan all relevant portions of the specification and attach or include with your Pre-Registration submission.
- To save a copy of your completed form to a desired location, select the "Save" icon at the bottom of the last page.
- To print a copy of your completed form to a desired location, select the "Print" icon at the bottom of the last page.
- Submit the completed form along with a copy of the project specification by email.
  - To save and email upon completing the application, select the "Save/Email" icon at the bottom of the last page.
  - Email: archtech@polyguard.com
- A Polyguard Technical Services Representative may contact you for further additional information if needed.
- Please allow Polyguard 24 to 48 hours to have one of our Technical Staff members review your form. We will contact you regarding the status of your registration via email.
- Approved pre-registrations will be assigned a number and sent via email unless an alternate method is requested.
- You may contact our Architectural Technical Services Department with any questions at archtech@polyguard.com or 214-515-5000.

polyguard ARCHITECTURAL

WARRANTY

Date (mm/dd/yyyy)

Pre-Registration # *(Assigned by Polyguard)*

Polyguard Extended Material Warranty Pre-Registration Form

In order to register your project for an Extended Material Warranty, please read and complete the following information.

Project: *please complete all of the following information*

Project Name | Property Address

City | State | Zip

Architect: *please complete all of the following information*

Contact Person | Email Address

Architect Firm Name | Mailing Address

City | State | Zip | Phone

General Contractor: *please complete all of the following information*

Contact Person | Email Address

GC Firm Name | Mailing Address

City | State | Zip | Phone

Installer: *please complete all of the following information*

Contact Person | Email Address

Installer Firm Name | Mailing Address

City | State | Zip | Phone

Expected starting date of project: _____

Person completing this form: *please complete all of the following information*

Name | Company

Title | Phone | Email Address

Signature | Date *(mm/dd/yyyy)*

☐ I understand that by typing my name in the signature field above, serves as an electronic signature for purposes of this form.

Warranty Pre-Registering For

☐ **Extended Material** ***Term _____ years***

- ☐ *By Installation Date* _____ **Estimated Date** (mm/dd/yyyy)
- ☐ *By Substantial Completion Date* _____ **Estimated Date** (mm/dd/yyyy)
- ☐ *Spec Included (spec must accompany Pre-Registration)*

All Extended Material warranties require that drainage/protection board MUST be Polyguard brand.

Polyguard product(s) and square footage of each to be installed:

Product	***Sq. Ft.***

Additional Notes:

P.O. Box 755, Ennis, TX 75120
PH: (214) 515-5000
www.Polyguard.com