BaySystems NorthAmerica

BSNA Job No. _____

# WARRANTY REQUEST FORM

**WARRANTY TYPE:** ☐ 5 Yr System ☐ 15 Yr System ☐ 5 Yr Coating
☐ 10 Yr System ☐ Special ☐ 10 Yr Coating

**COATING TYPE:** ☐ Acrylic ☐ Silicone ☐ Polyurea ☐ Everestoration

**APPLICATOR:**_____ Phone #_____

Address:_____

**PROJECT OWNER:**_____ Phone #_____

Address:_____

**BUILDING NAME:**_____

Address:_____

Contact Person:_____ Phone #_____

**ARCHITECT:** _____

**ROOF CONSTRUCTION:** ☐New Construction ☐Remedial ☐Renewable (Infrared Moisture Survey Required) (attach IR report)

**ROOF DESCRIPTION:** Substrate, entire composite beginning with deck type_____
_____
_____

**SPECIFICATIONS:** Details of Surface Prep._____
_____
_____

**CHANGES FROM BSNA SPEC:**_____

**PERIMETER EDGE DETAIL:** ☐ Replace ☐ Reattach **PLANNED FINISH PITCH**_____

**ROOF INSTALLATION MATERIALS:**

**Polyurethane Foam:** Product No. & Density _____ Thickness_____

**Primer:** Product No. _____

**Coating, Basecoat:** Product _____ Color_____ Millage_____

**Coating, Middle:** Product _____ Color_____ Millage_____
**(if applicable)**

**Coating, Topcoat:** Product _____ Color_____ Millage_____

**Granules:** Product _____ Color_____ Pounds _____

PLANNED STARTUP DATE:_____PLANNED COMPLETION DATE:_____

*System Warranty requires Penta inspection; Coating Warranty requires Contractor Final Inspection Report

| OWNER SIGNATURE | APPLICATOR SIGNATURE | BSNA SIGNATURE |
| --- | --- | --- |