

CLAIM FORM & SUMMARY

Adore Floors, Inc.
Manufacturers of Luxury Vinyl Planks & Tiles

Distributor's Information

Check Product Used

Company Name _____
 Claim Number _____
 Date Received _____
 Contact Name _____
 Distributor's Invoice Number _____
 Adore Floors Invoice Number _____



Product Information

Product SKU _____
 Production Lot No _____
 Date of Installation _____
 Date Complaint Appeared _____
 Square Feet Installed _____
 Square Feet of Complaint _____
 Area Installed In _____
 Date Inspected _____
 Date of Follow-Up (if needed) _____
 Structure Complete & Enclosed? (yes or no) _____
 HVAC Operational & Functional? (yes or no) _____
 On, Above or Below Grade? _____
 Subfloor (i.e. - concrete, plywood, etc.) _____
 Subfloor Condition (i.e. - level, damaged, etc.) _____
 Moisture Test Type & Results _____
 Expansion Gap (gap width if applicable) _____
 Adhesive Manufacturer & Model _____
 Trowel Notch Size _____
 Floor Finish / Coating _____
 Observed Maintenance Routine _____

Retailer's Information

Company Name _____
 Contact Name _____
 Address 1 _____
 Address 2 _____
 City / State / ZIP _____
 Phone Number _____
 Fax Number _____
 E-mail Address _____

End User's Information

Company Name (if applicable) _____
 Contact Name _____
 Address 1 _____
 Address 2 _____
 City / State / ZIP _____
 Phone Number _____
 Fax Number _____
 E-mail Address _____

Inspection Details, Observations & Additional Comments

Signature _____
 Print Name _____

Inspector's Certification _____
 Phone # _____

Included Documents (Check All That Apply)

Manufacturer Invoice
 Distributor Invoice
 Retailer/Installer Invoice
 Defective Samples
 Installation Pictures

Claim Amounts:

Material _____
 Freight _____
 Labor _____
 Total : _____

Manufacturer's Use

DENIED ACCEPTED PARTIAL
 Approved Total _____
 Signature _____