



# ARK FLOORS CLAIM FORM

Submitted By: \_\_\_\_\_ Date: \_\_\_\_\_

## GENERAL INFORMATION

NAMES	ADDRESSES	CITY, STATE, ZIP	PHONE
Distributor:			
Retailer:			
Installer:			
Consumer:			

## PRODUCT INFORMATION

PRODUCT	AMOUNT	LOCATION
Name:	JOB SIZE:	Residential: Y N
Product #:	S/F In Dispute:	Commercial: Y N
Purchase Date:	Date Installed:	New Construction: Y N
Run #:	Date Prob. Noticed:	Remodel: Y N

Samples Submitted: Y N

Pictures Submitted: Y N

## JOB SITE INFORMATION

NAIL	SUBFLOOR	CONSTRUCTION	MISCELLANEOUS
Type:	Type:	Vented Crawl: Y N	M/C Floor:
Size:	Thickness:	Basement:	M/C Subfloor:
Spacing:	Grade Level:	Joist Spacing:	Drainage Issue: Y N

Describe any other unusual job site conditions affecting floor:


Additional Comments/Recommendations:


## CREDIT REQUEST

PRODUCT	S/F	PRICE S/F	TOTALS
Name/Number:			
Labor (if applicable)			
Misc: (describe)			

**TOTAL CREDIT DUE:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Send Completed Form to: \_\_\_\_\_

CLAIM FORM