



COMPASS MATERIALS

Inspection Request Form

RETAILER INFORMATION

Retailer :
 Complete Address :
 City/ State/ Zip :
 Invoice Number# :
 Business Phone# : FAX# :
 Store' s Email : Contact Name :
 Product Description : Date of Sale :

INSTALLER INFORMATION

----- Do It Yourself ----- Installer Provided by Customer -----
 Professionally Installed Name : Phone# :
 Installer C15# : Date of Installation :

HOME OWNER INFORMATION

Name :
 Address :
 City/ State/ Zip :
 Phone# : Email :

RETAILERS INSPECTION REPORT

Date of Inspection : Inspected by :
 Square Footage Involved : Problem Location :
 Customer' s Complaint : Floor Completely Installed
 YES NO
 Inspector' s Findings :

 To avoid possible delays in processing your claim, please fill out competely and accurately.
 If you have any questions or need assistance filling out this form , please email or call
Compass Materials.

I certify that to the best of my knowledge information given on this form is true and correct .

Signature : Print : Date :

PLEASE NOTE:

1. Please provide pictures clearly showing floor in question along with the form.
2. The retailer must first look at consumers complaint at job site.Should the retailer feel the complaint is valid and falls under **Compass Materials'** s warranty, fill out this form.