

# Tri-State Flooring Product Claim Form

Send labeled samples to Karndean Designflooring Claims Dept. 1100 Pontiac Court Export, PA 15632



**Please complete all fields – Failure to do so will delay processing**

Today's Date: \_\_\_\_\_

Product Install Date: \_\_\_\_\_

## Tri-State Flooring Account Information

Account Name: \_\_\_\_\_

End User Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Installed by this Retailer: Yes: \_\_\_\_\_ No: \_\_\_\_\_

Email: \_\_\_\_\_

## Karndean- TSF Information

TSF Contact : \_\_\_\_\_

Karndean Invoice # : \_\_\_\_\_

TSF email / Phone: \_\_\_\_\_

Karndean Batch # : \_\_\_\_\_

## Product Information

Product Used: \_\_\_\_\_

TSF Invoice #: \_\_\_\_\_

Ordered Boxes : \_\_\_\_\_

TSF Batch #: \_\_\_\_\_

Affected Boxes: \_\_\_\_\_

Affected Square Foot: \_\_\_\_\_

## Sundries Information

Karndean Adhesive Used: DrySet \_\_\_ K95HM \_\_\_ K-Spray \_\_\_ 2 Part Epoxy \_\_\_ Other \_\_\_\_\_

Karndean Maintenance Products Used: Clean \_\_\_ Remove \_\_\_ Refresh \_\_\_ Other \_\_\_\_\_

## Description of the Claim

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## Description of the Resolution Requested

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## Samples and Photos of All Affected Areas

Samples Submitted of Affected Areas: \_\_\_\_\_ (Send labeled samples to Karndean Designflooring Claims Dept.)

Photos Submitted of Install & Affected Areas: \_\_\_\_\_ (Send photos of affected areas and installation with claim form)

## Site Information

Type of Sub-floor: \_\_\_\_\_

Product Acclimation Time: \_\_\_\_\_

Floor Prep Completed: \_\_\_\_\_

Moisture Test Type & Results: \_\_\_\_\_

Was the Floor Rolled: Yes \_\_\_\_\_ No \_\_\_\_\_

Additional Comments: \_\_\_\_\_

**Please note all information is needed to properly evaluate each claim in a timely manner.**

**See claims check-list for more details - Attach additional information if needed.**

**Contact Tri-State Flooring with any questions.**