



WARRANTY REGISTRATION FORM

Dealer/Distributor: _____ Date: _____

Project Name: _____ Bldg. Type: _____

Address: _____

City: _____ State: _____ Zip: _____

Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

AIA Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Project Completion Date: _____

Installation Company: _____ Phone: _____

I hereby warrant that TABS II products have been installed in accordance with: project plans and specifications, TABS WALL SYSTEMS installation manual and building code requirements.

Installer: _____
(Print Name) Signature

I hereby approve that the TABS WALL SYSTEMS was properly installed to: the project plans and specifications, TABS WALL SYSTEMS installation manual and building code requirements.

General Contractor: _____
(Print Name/Company) Signature