



Fire Resistant & Non-Combustible Cladding

943 Gainesville Hwy. Bldg 100-4000
Buford, GA 30518 USA
+1. 470.589.7449
alfrex@alfrexusa.com
www.alfrexusa.com

WARRANTY APPLICATION

This form is applicable to both Alfrex Finish and Bond Integrity Warranty requests. Both warranties may be requested utilizing one warranty application. Please complete all information fields below and submit this form to Alfrex using our contact information below. Warranty applications cannot be reviewed unless completed in full.

Mail In:	Email:
Alfrex, LLC.	contact@alfrexusa.com
943 Gainesville Hwy.	
Bldg 100, Ste. 4000	
Buford, GA 30518 USA	

Important Notes:

- Warranty applications will be evaluated based upon the product type, coating finish, project location, and other factors that may affect product performance.
- Upon acceptance, an Alfrex validated warranty will be generated and transmitted.
- No warranties shall be applicable or binding until executed by an authorized Alfrex employee and transmitted to the applicant, project owner or warranty assignee.
- By submitting the warranty application form, you consent to allow Alfrex, LLC to collect your contact information
- Warranties are available for Alfrex ACM FR and Alfrex Plate only and not applicable to coated sheet metal.
- Sample warranties are available for download and review on our website, alfrexusa.com and are for reference purposes only.



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WARRANTY APPLICATION

WARRANTY APPLICATION INFORMATION			
Applicant Name		Applicant Email	
Applicant Company		Applicant Phone	

WARRANTY TYPE			
Coated Finish Warranty	<input type="radio"/> 30 Year	Bond Integrity Warranty	<input type="radio"/> 10 Year
	<input type="radio"/> 20 Year		<input type="radio"/> 5 Year
	<input type="radio"/> 10 Year		<input type="radio"/> N/A
	<input type="radio"/> 5 Year Anodized		
	<input type="radio"/> N/A		
Company Name		Primary Contact Name	
Company Address Line 1		Address Line 2	
City		State / Province	
Zip / Postal Code		Country	
Contact Phone Number		Contact Email	

PROJECT OWNER - WARRANTY ASSIGNEE	
Project Owner - Warranty Assignee Name	
Email	

PROJECT INFORMATION			
Project Name			
Project Address Line 1		Project Address Line 2	
City		State / Province	
Zip / Postal Code		Country	



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PROJECT DETAILS		
Date of Substantial Completion		
Exposed Fastener Attachment	<input type="radio"/> Yes	<input type="radio"/> No
Perforated Panel Face	<input type="radio"/> Yes	<input type="radio"/> No
Exposed Panel Edge	<input type="radio"/> Yes	<input type="radio"/> No
Location < 1500 feet of water	<input type="radio"/> Yes	<input type="radio"/> No
Exposure to Ocean Fog or Mist	<input type="radio"/> Yes	<input type="radio"/> No
Panels installed < 46° to vertical	<input type="radio"/> Yes	<input type="radio"/> No

PRODUCT DETAILS		
Alfred LLC Sales Order or Invoice Number		
Type of Alfred Product	<input type="radio"/> Alfred ACM FR	<input type="radio"/> Alfred Plate
Color Finish Name		
Type of Alfred Product	<input type="radio"/> Alfred ACM FR	<input type="radio"/> Alfred Plate
Color Finish Name		
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