



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:

Alfrex, LLC.
943 Gainesville Hwy.
Bldg 100, Ste. 4000
Buford, GA 30518 USA

Email:

contact@alfrexusa.com

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 AND APPLICANT INFORMATION			
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"/> 5 Year Anodized		
	<input type="radio"/> N/A		
Applicant 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	

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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Color Finish Name		

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Color Finish Name		