



Warranty Transfer Form

Warranty Number: _____ Project Name: _____

Date of Completion: _____ Transfer Date: _____

Roofing Contractor: _____

Mail To:

Phoenix Products
Attn: Warranty Administrator
7310 W Roosevelt, Suite 32
Phoenix, Arizona 85043

Email To:

kellison@PHXProducts.com

Fax To:

1-888-882-1101

Original Warranty Type (check one)

- _____ Residential Lifetime Material (Transfer Fee \$250)
- _____ Commercial Material (Transfer Fee \$250)
- _____ Warranty Advantage (Transfer Fee \$250)
- _____ Full Systems NDL (Inspection Fee \$500 & Transfer Fee \$250)

Payment Options:

Card #: _____ Exp Date: _____

Name: _____ CVV: _____

Amount Paid: _____

OR Check Number: _____

General Information

(check the ones that apply to the best of your knowledge)

I am the _____ new / _____ previous owner of the referred building

_____ There are no known repairs or modifications to the building that were not completed in accordance with the PHX Division-7 Specification Manual

A roof inspection _____ has / _____ has not been conducted by an approved PHX representative within the past 90 days

THE ABOVE INFORMATION IS TRUE AND ACCURATE

Print Name (Previous Owner): _____

Signature: _____ Date: _____

Ownership Transfer Date: _____

Print Name (New Owner): _____

Signature: _____ Date: _____

NEW INFORMATION FOR TRANSFERRED WARRANTY

Building Name: _____ Owner Name: _____

Mailing Address: _____

Phone Number: _____ Email: _____

For Accounting Use Only

Date Received: _____ Approved by: _____