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Dalton, GA

Hickory, NC

Mount Airy, NC

Salt Lake City, UT

EnduraTech® Premier Roofing System Request for Warranty Form

Must be approved before works begins

- ☐ EnduraRock™ System Warranty [fill out BOTH sides]
☐ 10 Year ☐ 15 Year ☐ 20 Year
- ☐ EnduraPlus™ System Warranty [fill out BOTH sides]
☐ 10 Year ☐ 15 Year ☐ 20 Year
☐ Optional Wind Warranty ☐ Optional Florida Power & Light Coating Warranty
- ☐ EnduraTech® Material Only [fill out this side only]
☐ 10 Year ☐ 15 Year ☐ 20 Year

Tier One Applicator

Address _____

Phone Number/Email _____

Building Owner

Address _____

Phone Number/Email _____

Building Name & Contact

Address _____

Phone Number/Email _____

Name of Roof Section _____

Description of Current Roof ☐ New Construction or ☐ Re-Roofing

Roof Size _____ ft² Age _____ Pitch _____ ☐ Heated ☐ Air Conditioned

Type of Deck _____ Type of Substrate to which Foam will be applied _____

Projections _____

Building's Use _____

Current Problem _____

Core sample of roof down to deck submitted: Yes _____ No _____

Proposed Scope of Work

Foam Density _____ lbs/ft³ Foam Thickness _____ in Coating Type _____ Thickness _____ mil

If EnduraRock, Type of Rock _____ Size _____

Other Details _____

Planned Start-up Date _____ Planned Completion Date _____

This roofing project will be completed in accordance with NCFI ENDURATECH Premier Roofing System specifications and recommendations and shall be completed within a year of signing this request.

Signed by Applicator: _____ Date _____

Acceptance by NCFI: _____ Date _____

(Sign next page if system warranty desired)

Attach Roof Diagram

EnduraTech® Premier Roofing System

Request for Warranty Ten, Fifteen, or Twenty Year

NCFI Polyurethanes and the NCFI TIER ONE APPLICATOR indicated on the reverse side of this form, enter into the following agreement, which is supplemental to the NCFI TIER ONE APPLICATOR AGREEMENT for NCFI EnduraTech Premier Roofing System WARRANTY, for the purpose of providing the building owner, as described on the reverse side of this form (OWNER), a Ten, Fifteen, or Twenty Year Warranty.

NCFI and NCFI TIER ONE APPLICATOR agree to the following:

- (1) NCFI TIER ONE APPLICATOR is to pay in full for all materials used in this roof project (hereinafter referred to as PROJECT) and all warranty fees prior to the issuance of the Warranty.
- (2) The warranty must be issued within 90-days of job completion. NCFI TIER ONE APPLICATOR shall notify NCFI upon completion of work so a final inspection can be completed, pay warranty fees and obtain necessary signatures in a timely manner. NCFI will ensure that inspections will be scheduled and paperwork will be completed in a timely manner.

(2) NCFI TIER ONE APPLICATOR agrees to inspect the warranted roofs one year and two years after completion of the PROJECT and at least every two years thereafter as long as the Warranty remains in effect. NCFI TIER ONE APPLICATOR will be responsible for correcting any and all workmanship defects discovered as a result of this inspection, notwithstanding the responsibilities listed below. Please send a report of your findings to NCFI.

(3) In the event repairs covered under the WARRANTY AGREEMENT are needed after NCFI specifications have been followed, responsibilities are as follows:

- (a) During the first 2 years that the Warranty is in effect, NCFI will provide the required foam and coating materials to NCFI TIER ONE APPLICATOR. NCFI TIER ONE APPLICATOR will provide tools and labor needed to complete repairs.
- (b) During the balance of the warranty period, NCFI will be responsible for the full cost of warranty repairs. NCFI TIER ONE APPLICATOR, at NCFI's request, shall provide NCFI with a proposal, including reasonable cost, to complete repairs. NCFI may accept NCFI TIER ONE APPLICATOR's proposal or seek alternative means to affect repairs.

(4) If either party is notified of a warranty claim, it shall promptly notify the other and arrange the necessary inspections.

(5) The obligations of NCFI and NCFI TIER ONE APPLICATOR contained in this agreement shall survive the termination of the NCFI TIER ONE APPLICATOR AGREEMENT.

TIER ONE APPLICATOR

Firm Name _____

By (Signed) _____

By (Typed/Printed) _____

Title _____ Date _____

NCFI POLYURETHANES

By (Signed) _____

By (Typed/Printed) _____

Title _____ Date _____