

# TECPLY UNDERLAYMENT CLAIM FORM

Distributor \_\_\_\_\_ Phone No. \_\_\_\_\_  
(Note branch-filing claim)

Address \_\_\_\_\_ Contact Name \_\_\_\_\_

Retailer \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_ Contact Name \_\_\_\_\_

Customer \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

Installer \_\_\_\_\_ Phone No. \_\_\_\_\_

Address \_\_\_\_\_

## INSTALLATION DETAILS

Complaint Description \_\_\_\_\_

Resolution request \_\_\_\_\_

No. of Sheets installed \_\_\_\_\_ Date installed \_\_\_\_\_ Date of Claim \_\_\_\_\_

Was product acclimated at the site with permanent HVAC \_\_\_\_\_

How long had structure been closed with permanent HVAC before installation \_\_\_\_\_

Vinyl name & brand installed: \_\_\_\_\_ Date installed \_\_\_\_\_

Total layers of vinyl \_\_\_\_\_ Total layers of underlayment \_\_\_\_\_ Total layers of subfloor \_\_\_\_\_

Basement or crawl space: \_\_\_\_\_ If crawl space, minimum distance from ground \_\_\_\_\_

Is crawl space ventilated \_\_\_\_\_ How often \_\_\_\_\_ Total sq. in. per vent \_\_\_\_\_

Spacing of floor joists: \_\_\_\_\_

Type of adhesive \_\_\_\_\_ Amount of open time \_\_\_\_\_

Type of patching compound \_\_\_\_\_ How much cure time before vinyl installation \_\_\_\_\_

Length of fastener \_\_\_\_\_ Type of fastener \_\_\_\_\_ Galvanized? \_\_\_\_\_

Spacing of fasteners at seams \_\_\_\_\_ Spacing in field \_\_\_\_\_

Note any history of water leaks above or below finished floor \_\_\_\_\_

Attach scaled drawing showing plywood and vinyl layout with areas in question highlighted.

Attach copy of original invoice with invoice no. for vinyl, adhesive, patch and underlayment.