

# Project Warranty Claim Form

## Project Details:

- Project Name: \_\_\_\_\_
- Project ID: \_\_\_\_\_
- Date of Project Completion: \_\_\_\_\_
- Warranty Number: \_\_\_\_\_

## Claim Information:

- Type of Warranty:
  - Structural
  - Material
  - Labor

## Details of Warranty Issue:

Issue Identified	Date Reported	Urgency Level	Resolution Required
		<input type="checkbox"/> High	<input type="checkbox"/> Repair
		<input type="checkbox"/> Medium	<input type="checkbox"/> Replacement
		<input type="checkbox"/> Low	<input type="checkbox"/> Refund
		<input type="checkbox"/> High	<input type="checkbox"/> Repair

## Attachments Provided:

- Photos of Damage
- Contract/Warranty Agreement

**Notes or Comments:**

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**Authorized Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_