



# EUROSHIELD®

THE SMART CHOICE IN ROOFING

## G.E.M. Inc. Warranty Claim Form

**\*To be returned to G.E.M. Inc. by Registered Mail Only\***

**\*Attach copy of your Warranty Certificate (filled out at time of installation)\***

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Prov/State \_\_\_\_\_ Country \_\_\_\_\_

Postal/Zip \_\_\_\_\_ Phone (     ) \_\_\_\_\_ Installer \_\_\_\_\_

**Product Purchased** \_\_\_\_\_ **Colour** \_\_\_\_\_ **Install Date** \_\_\_\_\_

Photos Attached? Y\_\_ N\_\_    Photos can be emailed to [info@euroshieldroofing.com](mailto:info@euroshieldroofing.com)

Installation Address (if different from above) : \_\_\_\_\_

City \_\_\_\_\_ Prov/State \_\_\_\_\_ Country \_\_\_\_\_

### REASON FOR CLAIM:


#### For Office Use Only

Follow-up date: \_\_\_\_\_ Site Visit: Yes \_\_\_ No \_\_\_    Date of Site Visit: \_\_\_\_\_

Action Taken: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional Follow-up required: \_\_\_\_\_

\_\_\_\_\_