



**Thermo Manufacturing Systems, LLC**  
**P.O. Box 218**  
**Lindale, TX 75771**  
**Phone (800) 882-7007**  
**Fax (903) 881-8787**

## **Job Completion Form**

The following "Job Completion Form" is required and must be completely filled out and returned to Thermo Manufacturing Systems, LLC, PO Box 218, Lindale TX 75771. Warranties cannot be issued on any completed project without the return and receipt of this form to Thermo Manufacturing Systems, LLC. Delays in completing this form will delay the issuance of the requested manufacturer warranty. **Do not complete and return until the project's completion.**

**Project Name & Full Address:** \_\_\_\_\_

\_\_\_\_\_

**Applicators Name & Full Address:** \_\_\_\_\_

\_\_\_\_\_

**Summary of the installed Thermo Materials® Roofing System:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Number of Squares (including base flashings):** \_\_\_\_\_

**Date of Project Completion:** \_\_\_\_\_

By the signature below, the Applicator is assuring Thermo Manufacturing Systems, LLC, that the information contained is accurate to the best of his/her knowledge and that the project was installed to Thermo Manufacturing Systems, LLC, published specifications. Furthermore, inaccuracies between the supplied information and actual project conditions, such as size that would require additional warranty fees to be paid, are the responsibility of the Applicator to correct prior to the issuance of the warranty.

\_\_\_\_\_  
**Signature**

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

\_\_\_\_\_  
**Title**