Post Warranty Alteration Form

Date:		
Project #:	or Warranty #:	Exp. Date:
Building Identification:		
Building Address:		
Owner:		
Type of Post Warranty Alteration:		
General Roof Alterations	Garden Roof System	Photovoltaic (PV) Installation
General Alterations or Garden Ro	oof projects only:	
building. All attempts should be ma	ade to involve the original insta	x roof system on the above referenced alling contractor to make the necessary of to perform alterations and repairs to a
submitted documents. The purpose membrane-related alterations com required inspection is \$750.00, pa	e of the PWA Inspection is to very solution of the PWA Inspection is to very solution of the PWA Inspection is to very solution of the PWA Inspection of t	n (PWA) inspection upon review of the verify new membrane flashings or other air recommendations. The charge for a tems. No payments will be accepted ected to the owner listed on the warranty information has been provided.
GenFlex requires the following info existing warranty to remain in full fo		existing warranted project, and for the
GenFlex Contractor's Name:		
GenFlex Contractor's License #: _		
I certify the following is attached to	this document: (all boxes must	be checked)
Before and After photos clearly	name of contractor performing roy showing scope of work perform formed including all flashing and on of Alterations or Additions	ned
Alterations over \$10,000.00 YES NO		
Photovoltaic (PV) projects only:		
An inspection by a GenFlex Repres completion photos. The purpose of	sentative may be required upon of the PWA Inspection is to very only with GenFlex's written repair	the PV installation has been completed. review of the submitted documents and erify new membrane flashings or other r recommendations. GenFlex does not
I certify the following information is	attached to this document: (all	boxes must be checked)
Name of PV Manufacturer Drawing to include proposed P Overburden waiver completed PV rack manufacturer's detail of	V layout and Roof Plan F and signed by the Building Own	
Name of Submitter		Date
Representative of (Company)		-mail

Upon successful review of the completed work and receipt of the content of this form, the existing warranty will remain in full force. Failure to follow the procedures outlined in this document, including failing to notify GenFlex, may disrupt your warranty coverage on this project. GenFlex has the right to rely on the information submitted with this form, and submittal of this form is authorization for GenFlex to review the submitted material. The person submitting this form has the requisite power and authority to submit the information and make the request(s) via this form.

** Please submit this form and all required documentation and photos to warrantyclaims@bfusa.com. **

FAILURE TO FOLLOW THE PROCEDURES OUTLINED ABOVE, INCLUDING NON-NOTIFICATION TO GENFLEX, MAY DISRUPT WARRANTY COVERAGE.

