

# **CANYON TONE CLEAR HPC**

## **TWENTY (20)-YEAR LIMITED PRODUCT**

### **WARRANTY EXPLANATION**

The enclosed properly completed Warranty Request Form is required by UNITED COATINGS in order for the **Twenty (20)-Year CANYON TONE CLEAR HPC** Product Warranty to be issued:

#### **1. The Warranty:**

UNITED COATINGS warrants to the Building Owner that for a period of 10 years from date of completion, **CANYON TONE CLEAR HPC** applied to any area of sound, above grade concrete, sandblasted fiberglass reinforced concrete, brick, stone or stucco will perform as follows:

This warranty is not to be used for any other purpose unless specifically approved in writing by an officer of UNITED COATINGS.

#### **2. Warranty Request Form:**

- A. When the job is complete, the coating applicator must submit the Warranty Request Form to UNITED Headquarters for issuance of the Warranty.
- B. The properly complete Warranty Request Form by the Applicator certifies the application to be in accordance with UNITED'S current published application instructions.

MAIL TO:  
**UNITED COATINGS**  
19011 E. Cataldo Ave.  
Spokane Valley, WA 99016

Warranty Number: \_\_\_\_\_

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

**ATTENTION WARRANTY DEPARTMENT**

**WARRANTY REQUEST FORM FOR  
TWENTY (20)-YEAR CANYON TONE CLEAR HPC  
LIMITED PRODUCT WARRANTY PROGRAM**

1. Name of Project: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
2. Name of Applicator: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_
3. Name of Architect: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_
4. Owner of Building: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_
5. Type of Substrate: \_\_\_\_\_
6. Surface Preparation: \_\_\_\_\_
7. Gallons Used: \_\_\_\_\_ Area Coated: \_\_\_\_\_ Number of Coats: \_\_\_\_\_
8. Method of Application: \_\_\_\_\_ Type of Equipment: \_\_\_\_\_
9. Date Application Commenced: \_\_\_\_\_ Date Completed: \_\_\_\_\_
10. Date Printed on **CANYON TONE CLEAR HPC** Application Instructions: \_\_\_\_\_

I hereby certify that the above information is correct and that this coating application is in accordance with UNITED'S current published Technical Data/Application Instructions as stated. I agree to the terms and conditions of UNITED COATINGS' **CANYON TONE CLEAR HPC** 20-Year Limited Product Warranty which may be issued pursuant to this Warranty Request Form.

Applicator

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
Printed Name