

This card is to be completely filled out and signed by the property owner(s).
Mail this card to: Sun Windows, Inc. / Warranty Services / PO Box 1329 / Owensboro, KY 42302-1329

Product Information

Select your product type

- SunClad Windows and Doors
- SunVinyl New Construction Windows
- SunVinyl Replacement Windows

Invoice #: _____ Date: _____
(Obtain from your Builder/Dealer)

Property Owner(s) Information

Name of Property Owner 1: _____

Name of Property Owner 2: _____

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

Agree: I have read and agree to the terms of the SunClad window and door product warranty and have received a copy of the warranty certificate.

Signature Property Owner 1: _____

Signature Property Owner 2: _____

Date: _____

Remarks: _____

Builder/Dealer Information

Name of Builder/Dealer: _____

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

Agree: I certify that the SunClad window and door products identified by the invoice number have been purchased for and installed at the listed property, and that the person(s) listed as property owner(s) are entitled to the SunClad window and door products warranty. I have supplied them with a copy of the warranty certificate.

Signature of Builder/Dealer: _____