



Tile & Stone Installation Systems Warranty Pre-Approval

LIMITED WARRANTY

Warranty Recipient: _____

Name: _____

Address: _____

Phone _____ Fax _____ Email: _____

Occupation (check one):

- Architect/Specifier
 General Contractor
 Tile Contractor
 Retailer
 Home Owner
 Developer/Building Owner

Project Address: _____

Project Size: _____

Project Type (check one):

- Residential
 Mall/Retail Site
 Industrial/Factory
 Multi-Unit Residential
 Hospital
 Airport
 Restaurant/Hotel
 Office Building
 Arena
 Other (please specify) _____

Description of Tile:

Type _____ Size _____

Description of Installation: _____

Environment of Installation: _____

- Interior
 Exterior
 Dry
 Water Immersion
 Other (please specify) _____

Substrate Type:

- Cured Concrete
 Backerboard
 Gypsum Wallboard
 Plywood
 Other (please specify) _____

Project Notes: _____

JAMO Architectural Consultant _____ Date _____