



WeatherStopper® System Plus Ltd. Warranty Application Form

Owner's Name		Phone
Street, City, State		Zip
Street, City, State of building (if different)		Zip
Contractor's Name	Phone	GAF Certification # (MUST include)
Street, City, State		Zip

CONTRACTOR: INDICATE PRODUCT USED IN EACH OF THE FOLLOWING CATEGORIES

<p>1. Indicate Type of Job</p> <p><input type="checkbox"/> Clean deck (GAF Shingles plus at least three accessory products required)</p> <p><input type="checkbox"/> Re-cover over existing shingles (GAF shingles plus at least two accessory product required)</p> <p>2. GAF Shingles</p> <p><input type="checkbox"/> Royal Sovereign®</p> <p><input type="checkbox"/> Marquis® WeatherMax®</p> <p><input type="checkbox"/> Timberline® Natural Shadow™</p> <p><input type="checkbox"/> Timberline® HD™</p> <p><input type="checkbox"/> Timberline® ArmorShield™ II</p> <p><input type="checkbox"/> Timberline® Cool Series</p> <p><input type="checkbox"/> Timberline® Ultra HD™</p> <p><input type="checkbox"/> Timberline® American Harvest™</p> <p><input type="checkbox"/> Slateline®</p> <p><input type="checkbox"/> Capstone®</p> <p><input type="checkbox"/> Grand Sequoia®</p> <p><input type="checkbox"/> Grand Canyon™</p> <p><input type="checkbox"/> Country Mansion®</p> <p><input type="checkbox"/> Grand Slate™</p> <p><input type="checkbox"/> Camelot®</p> <p><input type="checkbox"/> Camelot®30</p> <p><input type="checkbox"/> Camelot®II</p> <p><input type="checkbox"/> Country Mansion® II</p> <p><input type="checkbox"/> Grand Slate™ II</p> <p><input type="checkbox"/> Other GAF Lifetime Shingle _____</p> <p>2A. How many nails were used to install each shingle?</p> <p><input type="checkbox"/> 6 Nails</p> <p><input type="checkbox"/> 4 Nails</p> <p>2B. StainGuard Labeled?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>3. GAF Roof Deck Protection</p> <p><input type="checkbox"/> Deck Armor™</p> <p><input type="checkbox"/> Shingle-Mate®</p> <p><input type="checkbox"/> Tiger Paw™</p> <p><input type="checkbox"/> VersaSheild®</p> <p><input type="checkbox"/> RoofPro™</p> <p>4. GAF Leak Barrier</p>	<p>6. GAF Attic Ventilation</p> <p><input type="checkbox"/> Cobra® (roll)</p> <p><input type="checkbox"/> Cobra® Ridge Runner™ (rigid roll)</p> <p><input type="checkbox"/> Cobra® Rigid Vent 3™</p> <p><input type="checkbox"/> Cobra® FasciaFlow™ Intake Ventilation</p> <p><input type="checkbox"/> Cobra® Snow Country™ or Snow Country Advanced™</p> <p><input type="checkbox"/> Vented RidgeCrest™</p> <p><input type="checkbox"/> Other GAF Cobra® exhaust ventilation _____</p> <p><input type="checkbox"/> Other Master Flow® exhaust ventilation _____</p> <p>7. GAF Ridge Cap Shingles</p> <p><input type="checkbox"/> Timbertex®</p> <p><input type="checkbox"/> Seal-A-Ridge®</p> <p><input type="checkbox"/> Ridglass®</p> <p><input type="checkbox"/> Z-Ridge®</p> <p><input type="checkbox"/> Vented RidgeCrest™</p> <p><input type="checkbox"/> Other GAF _____</p> <p>8. GAF Accessory Paint</p> <p><input type="checkbox"/> ShingleMatch™</p> <p><input type="checkbox"/> No accessory paint used</p> <p>9. Type of Structure</p> <p><input type="checkbox"/> Single family, detached residence</p> <p><input type="checkbox"/> Multi-family</p> <p><input type="checkbox"/> HOA/Condo Assoc.</p> <p><input type="checkbox"/> Commercial Property</p> <p>10. Low Slope Roofing Products Used</p> <p><input type="checkbox"/> GAFGLAS® #75 Base Sheet</p> <p><input type="checkbox"/> Ruberiod® SBS Base Sheet</p> <p><input type="checkbox"/> Ruberiod® SBS Modified Bitumen Membrane</p> <p><input type="checkbox"/> Liberty™ SBS Self-Adhering Base and Cap Sheets</p> <p><input type="checkbox"/> Liberty™ SBS Mechanically-Attached Base Sheet</p> <p><input type="checkbox"/> RoofMatch™ SBS Self-Adhering TPO Membranes</p> <p><input type="checkbox"/> Freedom™ Self-Adhering TPO Membranes</p> <p><input type="checkbox"/> LeakBuster™/Matrix™ SBS-Modified Adhesive</p> <p><input type="checkbox"/> LeakBuster™/Matrix™ SBS-Modified Flashing Cement</p> <p><input type="checkbox"/> LeakBuster™/Matrix™ 205 APP-Modified Adhesive</p> <p><input type="checkbox"/> The use of BMCA Pre-Flashed Accessories is also recommended</p>
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Send to:

GAF • Warranty Services • 1 Campus Drive • Parsippany, NJ 07054
Phone: (888) 532-5767, Option 1 • Fax: (973) 872-4215 •



- Weather Watch®(any version)
- StormGuard®
- UnderRoof™ (any version)

5. GAF Pre-Cut Starter Strip

- WeatherBlocker™
- Pro-Start™
- Other GAF with factory-applied adhesive) _____

5A. GAF Pre-Cut Starter Strip Installation Method

- Installed on rakes only
- Installed on eaves only
- Installed on both rakes and eaves

of Buildings _____ # of Steep Slope Squares _____ Color _____ Date of Installation _____ Cost of Installation \$ _____

of Low Slope Squares _____

Contractor Signature _____ **Date** _____
 (Certifies that above information is accurate)

Payment Method:

GAF Bucks Credit Card* Check

* Please do not provide credit card information on this warranty application. A GAF representative will contact you in order to process the payment

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