



**“Quality You Can Trust Since 1886...
From North America’s Largest Roofing Manufacturer”**



GAF/Habitat For Humanity Job Completion 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> <input type="checkbox"/> Clean deck <input type="checkbox"/> Re-cover over existing shingles <p>2. GAF Shingles</p> <input type="checkbox"/> Royal Sovereign® <input type="checkbox"/> Timberline® Natural Shadow™ <input type="checkbox"/> Timberline® HD <p>2A. StainGuard Labeled?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <p>3. GAF Roof Deck Protection</p> <input type="checkbox"/> Shingle-Mate® <input type="checkbox"/> Other GAF Product _____ <p>4. GAF Leak Barrier</p> <input type="checkbox"/> Weather Watch® <input type="checkbox"/> StormGuard® <input type="checkbox"/> Other GAF Product _____ <p>5. GAF Pre-Cut Starter Strip</p> <input type="checkbox"/> Pro-Start™ <input type="checkbox"/> Other GAF (with factory-applied adhesive) _____	<p>6. GAF Attic Ventilation</p> <input type="checkbox"/> Cobra® (roll) <input type="checkbox"/> Cobra® RidgeRunner™ (rigid roll) <input type="checkbox"/> Cobra® Rigid Vent 3™ <input type="checkbox"/> Cobra® FasciaFlow™ Intake Ventilation <input type="checkbox"/> Cobra® Snow Country™ <input type="checkbox"/> Cobra® Snow Country Advanced™ <input type="checkbox"/> Other Master Flow® exhaust ventilation _____ <input type="checkbox"/> Other GAF Cobra® exhaust ventilation _____ <p>7. GAF Ridge Cap Shingles</p> <input type="checkbox"/> Timbertex® <input type="checkbox"/> Seal-A-Ridge® <input type="checkbox"/> Ridglass® <input type="checkbox"/> Z-Ridge® <input type="checkbox"/> Other GAF Product _____ <p>8. Type of Structure</p> <input type="checkbox"/> Single family, detached residence <input type="checkbox"/> Multi-family <input type="checkbox"/> HOA/Condo Assoc. <input type="checkbox"/> Commercial Property <p align="center"><i>Please attach all supporting documentation with job submittal e.g. copies of product invoices, any local Habitat documentation, all authorization documentation provided.</i></p>
<p># of Buildings _____ # of Steep Slope Squares _____ Color _____ Date of Installation _____ Estimated Cost of Donated Labor \$ _____</p> <p># of Low Slope Squares _____</p>	

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

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

Habitat Affiliate Location _____