



**DEALER MUST INSPECT PRIOR TO FAXING
COMPLETED NOTIFICATION OF COMPLAINT**

Please fill out form completely

T&A Supply Company
6807 S 216th St- Kent, WA 98032
FAX (253)270-8882

T&A Representative:		Date:
Retailer:	Ph #	
Contact:		
Address:		
City:	State:	Zip:

Consumer:		Ph #
Address:		
City:	State:	Zip:

Product name/description:		Sku #
T&A Invoice #:		T&A Ref#:
Please provide copy of consumer invoice and labor bill		
Date purchased by consumer:		Qty purchased:(s/yds)(s/f)
Date issue was noticed by consumer:		Date complaint reported:
Date installed:		
Quantity installed:		Quantity involved in complaint:
Rooms installed:		

WOOD and LAMINATE

total # of Cartons		# of Cartons opened		# of Cartons installed	
Acclimation: YES	NO	How long?	Moisture reading of wood prior to installation:		

Installed by: Retailer		Consumer:		Consumer contracted installer	
Name of Installer:				Ph#:	

Installer's license and bond informaiton:

Sub Floor:	Ply-Wood		Concrete		OSB		Other:	
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Below grade:		On grade		Above Grade	
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Method of Installation:	Glue:		Float:		Staple:		Nail:	
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Pad-underlayment used:		
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Name of adhesive used:		Staple or nail size:
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Cleaning method and product used:		How often:
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Does this require an inspection? If yes, please call for quote.

Should an inspection be required, the dealer will be responsible for the inspection fee in the case there are no manufacturing related issues.

Describe issue:

What is needed to resolve?