



# REQUEST FOR WARRANTY TRANSFER

DATE: \_\_\_\_\_

ORIGINAL OWNER NAME: \_\_\_\_\_

NEW OWNER NAME: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

BUILDING NAME: \_\_\_\_\_

BUILDING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

WARRANTY NUMBER: \_\_\_\_\_ WARRANTY YEARS: \_\_\_\_\_ COMPLETION DATE: \_\_\_\_\_

You, the "New Owner" listed above, hereby requests that the stated warranty be transferred to you effective as of date you acquire title to the building. By signing below, you accept all of the terms and conditions of the specified warranty.

By signing below, you acknowledge that this form is a request for transfer only. The warranty has not been transferred. If Soprema accepts this request, Soprema will issue a Notice of Transfer Rider to you. Until such a rider is issued, you do not have any rights under the warranty nor will Soprema accept any warranty claims by you.

The first step to obtaining Soprema's consent to the proposed warranty transfer is to pay Soprema the sum of \$1,500 as a non-refundable fee. Promptly after receiving your funds, Soprema will arrange to have the roof inspected. The inspector will develop a detailed description of the scope of any work necessary to bring the roof to a warrantable condition. If work is required, a copy of the scope of work will be sent to you at the address provided below so you may contact an authorized Soprema roofer for a quotation of the costs involved in making the repairs. The repairs must be made by a Soprema authorized roofer within 30 days of the date you receive the scope of work, unless Soprema agrees in writing to a longer time period. If the repairs are made within the applicable time period to the satisfaction of Soprema, Soprema will promptly issue a Notice of Transfer Rider to you.

NEW OWNER SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

NEW OWNER'S ADDRESS: \_\_\_\_\_

Please return this form to: Soprema, Inc., National Warranty Department, 310 Quadral Drive, Wadsworth, OH 44281-9571.

**Fax: (330) 334-7903**

**Include with this form a copy of the warranty document to be transferred and your \$1,500 check made payable to "Soprema, Inc."**

New Owner:

By: \_\_\_\_\_

Name:

Title:

## SOPREMA INC.

310 Quadral Drive, Wadsworth, OH 44281

Phone (330) 334-0066

1 (800) 356-3521

Fax (330) 334-4289