

PLEASE READ BELOW INSTRUCTIONS BEFORE COMPLETING THE FORM

IMPORTANT!

- 1. If possible, please complete this form directly on the computer and email to Jaeckle's Claim department: claims@jaeckledistributors.com.
- 2. Please be sure to submit complete information to all of the questions.
- 3. Please send samples AND pictures. Pictures may be emailed to : claims@jaeckledistributors.com. Samples may be sent to :

Attn: Claims Department, Jaeckle Distributors, 4101 Owl Creek Dr, Madison, WI 53718 Without necessary information and samples, claims cannot be properly evaluated.

| 1. CUSTOMER IN | 1. CUSTOMER INFORMATION | | | |
|---------------------------------------|---|--|--|--|
| Customer name and contact information | | | | |
| Customer Phone # | | | | |
| Retailer information (name & adress) | | | | |
| | | | | |
| 2. PRODUCT INF | 2. PRODUCT INFORMATION | | | |
| Product | Laminate Luxury Vinyl | | | |
| Product name | | | | |
| Size (L x W x T) | Decor/color | | | |
| PO number (if available) | Gluedown or Click? | | | |
| Production code | (Found on the end label of LV cartons, on the back side of laminate planks) | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| 3. CLAIM SPECIFIC INFORMATION | | | |
|--|--|------------------------------------|--|
| ene. | Floor installed? If yes, date of installation? | Yes No Date: | |
| | Surface area in sqmt/sqft with defect? | | |
| | Who installed the floor? home owner professional installation team | other, specify: | |
| | Problem found | ng installation after installation | |
| | Installation type glued floated | | |
| | Width of expension gap? (space between planks & the wall) | | |
| | Subfloor | ther, specify: | |
| / issu | Air conditioner in the room where the problem occurred? | ☐ Yes ☐ No | |
| Quality | Humidifier in the room where the problem occurred? | ☐ Yes ☐ No | |
| Que | Underfloor heating? | ☐ Yes ☐ No | |
| | Type of underfloor heating | ☐ Electric ☐ Water | |
| | Type of underlay between subloor & the flooring? | | |
| | Moisture content of the subfloor where planks were installed? | | |
| | Average of relative humidity of the air after installation? | | |
| 4. DESCRIPTION OF THE CLAIM | | | |
| Please fill in if more information is required to understand your claim or if the claim is not specified above. (do not forget to mention the quantity and receive date or ship date) | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |