

QUOTE REQUEST & WARRANTY APPLICATION FORM

Section A: Quote Request

PART A: PROJECT DETAILS *(Applicator to complete)*

Project Name:		
Project Address:		
Describe items to be coated:		
Building Purpose:	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial
	<input type="checkbox"/> Other. Please describe:	
Site Location:	<input type="checkbox"/> Urban (> 5km from salt water)	<input type="checkbox"/> Chemical Exposure
	<input type="checkbox"/> Coastal (<5km from salt water)	<input type="checkbox"/> Tropical
Distance from High Tide Mark:	Proximity to Chemical Exposure:	
Comments:		
Substrate:	<input type="checkbox"/> Extruded Aluminium	<input type="checkbox"/> Sheet Aluminium
	<input type="checkbox"/> Welded Aluminium Sections	<input type="checkbox"/> Perforated Aluminium

PART B: YOUR DETAILS *(Applicator to complete)* PART C: PRODUCT DETAILS *(Applicator to complete)*

Company Name:	Product:
Registered Applicator No.:	Product Code:
Estimated Powder Quantity:	Contact:

PART D: QUOTE *(Dulux to complete/Quote Number to be quoted on your Purchase Order)*

Quote No:	Order Qty:	Price/kg <small>(excl. GST)</small> :
Signature Dulux:	Date:	Valid To:

PART E: POWDER COATING DETAILS *(Applicator to complete)*

Completion Date:	Kilograms of Powder Used:
Coated area m ² :	Batch Number Used:

PART F: OTHER PARTIES INVOLVED IN THIS PROJECT *(Applicator to complete)*

Architect/Specifier:
Fabricator :
Builder/Developer:

PART G: WARRANTY APPLICATION *(Applicator to complete)*

Warranty application for:	<input type="checkbox"/> Fluoraset X25 (25 Years)	<input type="checkbox"/> Duratec X15 (15 Years)
Other: <input type="checkbox"/> Please specify:		

In requesting warranty documentation, we certify that our company has

- Completed all testing in accordance with the Dulux Registered Applicator's manual.
- Confirmed that the results of testing on the coating meet or exceed test requirements.
- Documents and retained samples are available to validate these results.

Customer Signature:	Date:
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I/We hereby declare that the above information is true and correct. I/We acknowledge that in the event that the information provided herein is found to be false or misleading, that DuluxGroup (Australia) Pty Ltd and/or its related entities, as the case may be, (Dulux) reserves all its rights including but not limited to the right to immediately withdraw/cease this application and/or terminate any warranty. In making this application I/we consent to Dulux using the information provided to assess this application and for future promotional and marketing purposes in accordance with the provisions of the Commonwealth Privacy Act 1988.

PART H: WARRANTY ISSUED *(Dulux to complete)*:

Warranty Issued:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Warranty Number:		
Date Issued:		
Date:		

Note: Any advice, recommendation, information, assistance or service provided by Dulux Powder & Industrial Coatings in relation to goods manufactured by it or their use and application is given in good faith and is believed by Dulux Powder & Industrial Coatings to be appropriate and reliable. However, any advice, recommendation, information, assistance or service provided by Dulux Powder & Industrial Coatings is provided without liability or responsibility PROVIDED THAT the foregoing shall not exclude, limit, restrict or modify the right entitlements and remedies conferred upon any person or the liabilities imposed upon Dulux Powder & Industrial Coatings by any condition or warranty implied by applicable legislation, regulation or other government ordinance voiding or prohibiting such exclusion limitation or modification.