

DEALER COMPLAINT INSPECTION REPORT

Inspection Date _____

Inspected By _____

Consumer Name _____ **Dealer Name** _____

Address _____ **Address** _____

City/State/Zip _____ **City/State/Zip** _____

Telephone _____ **Telephone** _____

Installer Name and Telephone _____

Purchase Date _____ **Invoice Number** _____

P.O.# _____ **Date Installed** _____

Manufacturer _____ **Product Code** _____

Residential or Commercial _____ **New Construction/Remodel** _____

Job size (square footage) _____ **Date problem noticed** _____

Maintenance products used _____

What Rooms Installed _____

What grade is product on above/below/on _____ **What type of subfloor** _____

Basement yes/no **Crawl space** yes/no **Slab** yes/no **Insulated** yes/no

Moisture content in floor _____ **Room temperature** _____

Moisture content in subfloor _____ **Relative humidity** _____

Customer's Complaint _____

Retailer's Request/Questions _____

