StoneCrest
BUILDERS, INC™
Excellence in Construction and Design

Warranty Information Request

Name: _____

Mailing Address: _____

_____

Phone (H): _____

Phone (W): _____

Cell: _____ Cell: _____

E-mail Address: _____

Preferred Method of Contact: _____

Best Time to Contact: _____

Best Day(s) for Scheduling Warranty Work: M Tue Wed Th Fri

Warranty Issues Still Outstanding:* (please include date of original request)

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* Do not report new warranty issues at this time. *Sixty Day* and *One-Year* reports should be submitted as outlined in the *Warranty Guidelines* section of your Homeowner's Manual.