



APPLICATION FOR CHROMADEK OR GALVANISED WARRANTY

DATE :

WARRANTY TO BE ISSUED TO (ROLL FORMER):

ADDRESS OF ROLL FORMER:

PROJECT AND ADDRESS:

BUILDING TYPE (House, Warehouse, Factory):

WARRANTY REQUEST PERIOD:..... YEARS DATE REQUIRED FOR WARRANTY.....

SITE INSPECTED? YES NO

AREA OF ROOF: m²

MATERIAL ORDERED: 1. Tonnage 2.Gauge 3. Zinc Coating Weight

ARCELORMITTAL MATERIAL ORDER NUMBER (INCLUDE COIL NUMBERS).....
.....

COLOUR OF SHEETING.....PROFILE.....

STATE WHETHER THE PRODUCT HAS A CEILING, INSULATION BARRIER OR NOTHING UNDER
.....

ARE THE EAVES EXPOSED? YES NO

PROJECT IS LOCATED.....Km FROM SALT MARINE OR SEVERE INDUSTRIAL INFLUENCE

INCORRECT INFORMATION INVALIDATES THE WARRANTY

NAME COMPANY

DESIGNATION TEL / CELL NUMBER

SIGNATURE DATE

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MJN Njike* (Chairman)
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DK Chugh*
FA Du Plessis*
M Macdonald*
S Maheshwari*
LP Mondli*
DCG Murray*

ND Orleyn*
RH Torlage (Chief Financial Officer)
GP Urquijo*

Company secretary:
Premier Corporate Consulting
Services (Pty) Ltd

noN*-executive, •Citizen of India,
■ Citizen of Spain





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