Central Coating Company, Inc.

License #458848

REQUEST FOR SERVICE

Complete This Form and Fax to: (559) 673-8243

Please Print

COMPANY REQUESTING SERVICE:

Name: _____

Mailing Address: _____

City/State/Zip: _____

Contact Person: _____ Phone: ( )

Fax: ( ) _____ Pager: ( )

PROJECT REQUIRING SERVICE:

Name: _____

Street Address: _____

City/State/Zip: _____

Contact Person: _____ Title: _____

Phone: ( ) ext.. Pager: ( )

Mobil: ( ) Roof Access: _____

SERVICE REQUIRED/DESCRIPTION:

(Circle One) New Penetration Maintenance Inspection Leak Other

Describe Problem: _____

BILLING INFORMATION:

Send billing to: _____

Purchase Order Required? ☐ Yes ☐ No PO# _____

Person Allowed to Request & Authorize Service: _____

Completing this form in its entirety will assist in a quicker response time. In requesting service, you acknowledge that in fulfilling your request for service, there is a potential for an accumulation of charges. In completing this request and signing below, you acknowledge that there may be a charge for our visit and will accept liability for any charges incurred. Note: Repairs made during rainy weather are temporary only. In most cases, serviceman will need to return to provide permanent repairs with additional charges for 2nd call unless it is a warranty repair. Central Coating Company's service technician will contact you with an estimate for repairs prior to commencing work.

_____ _____

Print Name Title

_____ _____

Signature Date