



BUILDERS

Finish Supply

(714) 540-7117
FAX (714) 957-6094

3400 W. Warner Ave - Suite G
Santa Ana, CA 92704

Service Request

Please Fax The Completed Form To 714-957-6094

Name: _____

Address: _____

City: _____ Phone () _____

Contractor Name: _____

Address: _____

City: _____ Phone () _____

License Number: _____

Are you the original purchaser of the unit? _____

Purchase Date: _____ Receipt # _____

Name of Manufacturer: _____

Product Line: _____

Type of Unit: _____

Date Delivered: _____ Date Installed: _____

Date Finished: _____ Date Refinished: _____

Was the Unit Professionally Installed? _____

Was The unit Professionally Painted? _____

Is There an Overhang? _____

Product Finished on All 6 Sides? _____

If Bay Window, are Corbels Installed? _____

Are Nail Holes Filled? _____

Has Finish Been Maintained? _____

Location in home: _____

Ladder or Scaffold Required? _____

Type of Exterior Construction: _____

Is The Home Currently Occupied? _____

Type of Unit; Casement Window etc.: _____

Description of Problem/ Additional Information:

BFS Use - Please do not write below this line

Date Received: _____	Problem Description: _____
Inspected By: _____	_____
Inspected Date: _____	_____
Parts Required: _____	Required Action: _____
_____	_____
Orig P.O. # _____ P.O.Date: _____	_____
Orig Work Order# _____ W.O. Date: _____	_____

Please complete the information below and fax to (714) 957-6094