

# ETX Surfaces Flooring Complaint Checklist

*Please fill out to the best of your ability with as much information as possible*

## Hardwood Flooring Complaint Checklist

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Report Date:

	Dealer		Installer		Builder		Consumer		
<b>Claim Number</b>									
Names									
Address									
City/State/Zip									
Phone									
***Email***									
Date job was: (enter dates)	Invoiced	Delivered	Installed	Problem noted	Dealer insp				
ETX Surfaces item # Quantity, sqft.				ETX Surfaces Run # (attach carton label)					
Description of Problem: (estimate the amount of floor affected)									
Subfloor Moisture	At time of installation?		At time of installation?						
Flooring Moisture	At time of installation?		At time of installation?						
Exterior Conditions: circle/highlight all that apply	Basement	Crawl space	Slab	Hi-Rise			Waterfront Lot?		
	Residential	Commercial							
	Roof Overhang?	Gutters?	Downspouts?	Water directed away from foundation?			Irrigation?		
Interior conditions: Circle/highlight as applicable and/or add notes.	Temperature?	Humidity %?	HVAC on?	Type HVAC?					
		Dehumidifier ?	Before Inst.	Gas	Forced air	Ducts			
	<b>1)</b>	Operational?		During Inst.	Electric	Radiator	Under floor		
		Humidifier ?		After Inst.	Wood stove	Baseboard	Ceiling		
		Operational?			Other	Radiant	Insulated?		
	Large Windows			Pets?			Gapped:	Cracked:	
South facing?			Type/Number:			Moldings	Walls		
Drapes/Shades?					Doors/Windows	Floor			

Report Date:

Basement or Crawl Space Conditions: circle and add notes as applicable	Temperature:	Humidity %:				
			HVAC?	Cracked walls?	Damp/Musty?	Paint peeling
	Moisture %:		Operational			Rusty nails
	Subfloor (underside):					
		6 mil black poly	Dehumidifier ?	Sump Pump?	Foundation Vents ?	
	Joists	ground cover	Operational?	Operational?	Open?	
		Full coverage			Positioned for Cross Ventillation?	
Other:					Min 15% of Crawl Space Area?	
Subfloor:	Plywood	On grade	Flat (3/16" in 10')		Sleepers?	
	OSB	Below grade	Thickness:		Moisture %	
	Board deck	Thickness:	Seams flush?			
	Concrete Slab:	Date Poured	Moisture content		Flat (3/16" in 10')	
Other:						
Fastening Methods:	Mechanical	Parallel to joist	Adhesive		Pad (floating)	
	Staple / Cleat		Type		Type	
	Schedule?		Trowel Notch		Thickness	
Width of Perimeter Expansion Gap						
Maintenance	Product used		Cleaning Schedule		2)	
Protective Covering?	Partially	Cardboard	Walk off mats	Area rug		
	Fully	Paper (felt/rosin)	Rubber	Skid Pad		
Proposed Solution?						
<b>3) Inspection</b>	<b>Inspection Details Should You Request One</b>					
Documentation			Material \$			
			Labor \$			
			Other \$			
Inspector Name			Total \$		ETX Surfaces Approval	
Signature					Date approved:	
<b>SEND TO:</b>	<b>ETX Surfaces, 8400-B Remington Ave. Pennsauken, NJ 08110</b>					
<b>4) Attachments</b>	ADDITIONAL COMMENTS:					
DEALER INVOICE						
LABOR ESTIMATE						
PHOTOS						
	Please email photos of the affected areas to: <a href="mailto:info@etxflooring.com">info@etxflooring.com</a>					