



# WARRANTY REGISTRATION

Mail to:  
Warranty Registration  
c/o Pental Surfaces  
3900 Industry Drive E  
Suite A  
Fife, WA 98424

Date: \_\_\_\_\_

## CONTACT INFO

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

e-mail: \_\_\_\_\_

## INSTALLATION INFO

\_\_\_\_\_

( Address )

\_\_\_\_\_

( City )

\_\_\_\_\_

( State )

\_\_\_\_\_

( Zip Code )

Fabricator/Installer: \_\_\_\_\_

Date Purchased: \_\_\_\_\_

Commercial Use

Residential Use

Date Installed: \_\_\_\_\_

I Have Read the Warranty

# of Slabs	Color	Finish	Usage