



**CUSTOMER INFORMATION:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

**PRODUCT(S) TO BE REGISTERED:**

**GLASS SKYLIGHTS**

Tempered Glass

QTY: \_\_\_\_\_

Impact Glass

**POLYCARBONATE  
SKYLIGHTS**

QTY: \_\_\_\_\_

**SOLAR ATTIC FANS**

QTY: \_\_\_\_\_

**K SERIES  
TUBULAR SKYLIGHTS**

QTY: \_\_\_\_\_

**ALUMINUM CURBS**

QTY: \_\_\_\_\_

**ACCESSORIES**

- SFVG Motorized System       SAF Garage Exhaust Kit
- Exhaust Vent Kit (SVFAN)       Dimmer Kit       Electric Light Kit       Solar LED Light Kit

**INSTALLATION INFORMATION:**

Date Installed: \_\_\_\_\_ Installer Name: \_\_\_\_\_ Installer Company: \_\_\_\_\_

Are you satisfied with the installation?  Yes  No      Are you satisfied with the product performance?  Yes  No

**ADDITIONAL COMMENTS:**