

Norandex Claim Procedures Overview for Homeowners

Incomplete information will likely result in delays or denials.

1. **Completed Claim Form:** which includes the following required information: Building owner contact name & info (Phone, Email, etc.), full complaint address (House # and street name, plus city/state/zip), mailing address if different than claim address, specific product involved, manufacturing codes (run #'s), installation date, nature of problem, quantity of affected material, plus any other pertinent details or information.
2. **Proof of Purchase:** Examples: sample, copy of original invoice, copy of applicable warranty or some other documentation specifically identifying product.
3. **Photos:** of the property showing full wall height & width of all walls (front, back, left & right) and close-ups of problem. Pictures of the issues must be taken before the product is removed from the wall.
4. **Samples:** Reference the guide below or work with your warranty representative to determine what length and quantity of samples are needed.

- Fade 2 samples, 2-3' length
 - Warp/Bow, Laps, Lock issues: 2 samples, min 6' length incl photos of product storage conditions
 - Other Mfg Related Issues: 2 samples, 2-3' length
 - Oilcan: 2 UNaffected samples, min 6' length
- No more than 7' samples should ever be sent to avoid extreme fedex surcharges.*

Examples of callout issues below:

Warp (below) & Bow
Curvature of the panel

Laps
Not lying flat

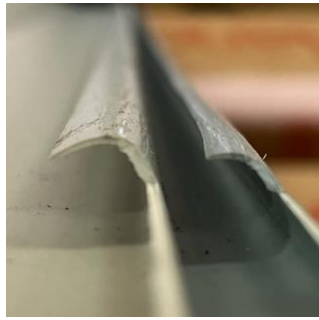
Lock-Butt Leg (below)
& Lock-Hanger

Oilcan

Small "soft ball" shaped bubbles on panel



*Bow – panels touch at middle, ends flair



*Lock-Hanger – Issue w/ lock at top of panel



Key Points

- Clearly write the Claim Number on the back of the samples
- Provide shipping tracking information to your warranty representative
- On **Jobs-In-Progress (JIP claims)**: Clearly mark “JIP” or “Job in Progress” on all emails, paperwork & samples

Send samples to:

Job-In-Progress:

Quality Department, 2651 Penny Rd, Claremont, NC 28610

All other claim types:

28610 Warranty Services, 803 Belden Rd, Jackson, MI 49203

Claim Number:
(OFFICE USE ONLY)

Norandex Sales Representative:

Email: _____

Claim Type: Homeowner Warehouse Job in Progress (JIP)

This questionnaire is designed to help the processing of your request. **Any missing information will DELAY resolution.**

PROPERTY INFORMATION

Name: _____ Name: _____
home/property owner first and last name spouse or secondary owner (if any) first and last name

Complaint Address: _____ City, State: _____ Zip: _____

Mailing Address: _____ City, State: _____ Zip: _____

Phone #: _____ Email: _____

Property Type: _____ Original Owner: YES NO If No, Date purchased:
Single Family Home Rental Co-Operative Housing **Is the home/property owner listed on this form the original owner when the product was installed?**
Duplex Condominium Commercial/Business _____

SIDING INFORMATION

Product Involved: _____ Color: _____

Profile: _____ Date of Product Installation: _____
month day year

Walls Affected: Check ONLY those affected and identify as if viewing from the front of the property. **Clear photographs in color with the full view of EACH side of the home, along with close ups showing each affected area are REQUIRED. They should be marked Front, Back, Right, Left.**

Front Back Right Left Other _____

Number of squares on building (total): _____ Amount Affected: _____ One square = 10' x 10'

ABC Supply Branch Location: _____
(where the product was purchased)

Installer Name: _____ Email: _____
first and last name or company name

Address: _____ Phone #: _____

City, State: _____ Zip: _____

REQUIRED ITEMS NEEDED TO PROCESS CLAIM:

Required Attachments:

- Proof of purchase or picture of nail hem
- Close up picture of the problem
- Picture of each side of the house
- Mfg Plant Run Code(s) _____
- Fade Siding Sample*: 2' - 3' length best representing degree of fade (DO NOT cut or damage the sample)

***If JIP:** Please send a siding sample best representing the issue. Please make sure to put the claim number on the back of the sample and **reference the claim procedure** overview for guidelines on sample specifications.

SEND SAMPLE TO: Quality Department Tracking #: _____
2651 Penny Rd Claremont, NC 28610

If an inspection is needed the property owner will be contacted.

***For All Other Issues or Non JIP:** Please reference the cover sheet for the appropriate qty and lengths needed. DO NOT cut or damage the sample. Please make sure to put the property address on the back of the sample.

SEND SAMPLE TO: Warranty Services Tracking #: _____
803 Belden Road Jackson, MI 49203

What is the nature of the problem: _____

Questions? Call 1-800-528-0942
Click SUBMIT FORM or Mail/Email to:

Norandex Warranty Department
One ABC Parkway
Beloit, WI 53511
norandexinfo@norandex.com