



THE NOBILITY OF WOOD AT YOUR FEET

Foresfloor warranty registration

Personal information

Surname	<input type="text"/>	Name	<input type="text"/>
Address	<input type="text"/>		
City	<input type="text"/>	Apt. / P.O.Box	<input type="text"/>
State/Province	<input type="text"/>	Postal Code/Zip Code	<input type="text"/>
Phone	<input type="text"/>	Country	<input type="text"/>
E-mail	<input type="text"/>		
Age group	<input type="checkbox"/> 18-24 years old <input type="checkbox"/> 25-34 years old <input type="checkbox"/> 35-44 years old		
	<input type="checkbox"/> 45-54 years old <input type="checkbox"/> 55-64 years old <input type="checkbox"/> 65 years old and over		
Annual Income	<input type="checkbox"/> 19 999 or less <input type="checkbox"/> 20 000-29 999 <input type="checkbox"/> 30 000-39 999		
	<input type="checkbox"/> 40 000-49 9999 <input type="checkbox"/> 50 000-59 999 <input type="checkbox"/> 60 000-74 999		
	<input type="checkbox"/> 75 000-99 9999 <input type="checkbox"/> 100 000 or more		

Retailer

Company	<input type="text"/>		
Representative	<input type="text"/>		
Address	<input type="text"/>		
Citg	<input type="text"/>	State/Province	<input type="text"/>
Postal Code/Zip Code	<input type="text"/>	Country	<input type="text"/>
Phone	<input type="text"/>	Fax	<input type="text"/>
E-mail	<input type="text"/>	Website	<input type="text"/>



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Purchasing

Date of purchase ____ / ____ / ____ (dd/mm/yy)

Product (as it appears on the package label)

Date code :

Width :

Gloss level :

Quantity purchased:

☐ m² ☐ ft²

Species :

Grade :

Stain :

Property construction date ____ / ____ (mm/aa)

Type of property

☐ Single family

☐ Apartments

☐ Second residence

☐ Condominium

☐ Townhouse

☐ Commercial

☐ Other (specify)

Room(s) where the product was installed

☐ Entrance / Foyer

☐ Living room

☐ Kitchen

☐ Dining room

☐ Bedroom

☐ Rec room

☐ Hallway

☐ Office

☐ Other (specify)

Level(s) where the product was installed

☐ First floor

☐ Ground floor

☐ Basement

Number of residents

Adults (18+)

Adolescents (12 to 18 years old)

Enfants (under 12 years old)



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Purchasing (continued)

Type of subfloor

- | | | |
|---|--|---|
| <input type="checkbox"/> Plywood : 1/2 po (13 mm) | <input type="checkbox"/> Plywood : 5/8 po (15 mm) | <input type="checkbox"/> Plywood : 3/4 po (20 mm) |
| <input type="checkbox"/> Concrete | <input type="checkbox"/> Oriented Strand Board (OSB) | <input type="checkbox"/> Tongue and groove plank |
| <input type="checkbox"/> Other (specify) | <input type="text"/> | |

Floor beam or joist spacing

- | | | |
|--|--|--|
| <input type="checkbox"/> 10" (25 cm) C/C | <input type="checkbox"/> 12" (30 cm) C/C | <input type="checkbox"/> 14" (36 cm) C/C |
| <input type="checkbox"/> 16" (41 cm) C/C | <input type="checkbox"/> 18" (46 cm) C/C | <input type="checkbox"/> 22" (56 cm) C/C |
| <input type="checkbox"/> 24" (61 cm) C/C | <input type="checkbox"/> Other (specify) | <input type="text"/> |

Heating floor installation

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> yes | <input type="checkbox"/> no |
|------------------------------|-----------------------------|

Type of installation

- | | | |
|--|------------------------------------|--------------------------------|
| <input type="checkbox"/> Regular | <input type="checkbox"/> Insertion | <input type="checkbox"/> Angle |
| <input type="checkbox"/> Other (specify) | <input type="text"/> | |

Heating System

- | | | |
|--|--|--|
| <input type="checkbox"/> Radiant | <input type="checkbox"/> Hot water heating | <input type="checkbox"/> Heating floor |
| <input type="checkbox"/> Forced air or heating ducts | <input type="checkbox"/> Electric baseboard heater | |
| <input type="checkbox"/> Other (specify) | <input type="text"/> | |

Ventilation and air conditioning units

- | | | |
|--|--|-------------------------------------|
| <input type="checkbox"/> Air conditioner | <input type="checkbox"/> Air exchanger | <input type="checkbox"/> Humidifier |
| <input type="checkbox"/> Dehumidifier | <input type="checkbox"/> Fan | <input type="checkbox"/> None |
| <input type="checkbox"/> Other (specify) | <input type="text"/> | |



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Choice

How did you hear of Foresfloor products ?

- | | | |
|--|--|---|
| <input type="checkbox"/> Trade show | <input type="checkbox"/> Store Display | <input type="checkbox"/> Magazine advertising |
| <input type="checkbox"/> Local retailer advertisement | <input type="checkbox"/> Recommendation from an interior decorator | <input type="checkbox"/> Recommendation from a general contractor |
| <input type="checkbox"/> Recommendation from a floor installer | <input type="checkbox"/> Recommendation from an architect | <input type="checkbox"/> Recommendation from a friend or relative |
| <input type="checkbox"/> Recommendation from a representative | <input type="checkbox"/> Other (specify) | <input type="text"/> |

Which factors influenced your decision to purchase a Foresfloor product ?

- | | | |
|--|---|--|
| <input type="checkbox"/> Quality | <input type="checkbox"/> Price | <input type="checkbox"/> Durability |
| <input type="checkbox"/> Finish | <input type="checkbox"/> Strip length guarantee | <input type="checkbox"/> Color selection |
| <input type="checkbox"/> Warranty | <input type="checkbox"/> Reputation | <input type="checkbox"/> Moisture Guard |
| <input type="checkbox"/> Other (specify) | <input type="text"/> | |

Who installed your hardwood floor ?

- | | | |
|--|-----------------------------------|--|
| <input type="checkbox"/> We did it ourselves | <input type="checkbox"/> Retailer | <input type="checkbox"/> Independent installer |
| <input type="checkbox"/> Other (specify) | <input type="text"/> | |

Information on the independent installer (if applicable)

Company	<input type="text"/>		
Installer name	<input type="text"/>		
Address	<input type="text"/>		
City	State/Province	<input type="text"/>	
Postal Code/Zip Code	Country	<input type="text"/>	
Phone	Fax	<input type="text"/>	

Please forward by mail or by fax.

Mail	<i>Foresbec</i> <i>Foresfloor Customer Service</i> 1750 Haggerty St. Drummondville (Quebec) J2C 5P8
Fax	+1 (819) 396-1307