

**GUARANTEE APPLICATION FORM**

Cooper Lane, Ulverston, Cumbria, LA12 9RA. Tel: 01229 869 100 / Email: guarantees@kingfisheruk.com

This Application Form must be completed within 7 days of job completion and forwarded to Kingfisher at the above address

Account No: ..... Contractors Title: .....

Address: ..... Contact No: .....

Client's Name: (Inc Initials): ..... Clients Tel No: .....

Address of Property Treated: ..... Post Code: .....

Contract Completion Date: ..... Contract No: .....

Type of Guarantees: ☐ 30 Yrs ☐ 20 Yrs ☐ 10 Yrs

DPC T.G T.T

NOTE: Only Approved Contractor may apply for  
Protection Scheme Guarantee.

Protection Scheme:

☐☐

Tanking Guarantee: (Dual: 10 Yrs Only)

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Dual: (T.T 10 or 20 Yrs Only)

☐☐**DAMP PROOF COURSE INJECTION (DPC)**

THICKNESS OF WALLS AND NUMBER OF RUNNING METRES TREATED:

NOTE: (Please state quantities used)

Thickness	115mm	230mm	350mm	500mm	OTHER
	(4 1/2")	(9")	(13 1/2")	(18")	( )

Linear Metres: ..... Linear Metres: .....

Material Quantity: Enviroject Fluid Ltrs: ..... Dri-Wall Cream 380ml: ..... Dri-Wall Cream 1ltr:.....

(KX11)..... Inc: Batch Number: ..... Anti-Sulphate: ..... Inc: Batch Number: .....

Type of Construction: Brick Stone Solid Cavity Other (State Construction) .....

☐☐☐☐☐

Injection Above or Below Joists: Above Below Removed Isolated

☐☐☐☐☐ Treated with Timber Paste

..... Litres

For re-rendering specification (See Tanking Guarantee below)

**TANKING GUARANTEE (T.G)**

Products and Amounts Used: Tankit / Aquatech (Please circle which used) .....Kg / Barrier Mortar: .....Kg

Batch No: .....

Batch No: .....

KX-11: ..... Litres Anti-Sulphate: ..... Litres Other (Please state): ..... / .....Kg

Batch No: ..... Batch No: .....

Is Internal Floor Level Lower  
Than External Ground Level☐☐

Tanked

☐☐

Type

☐☐

Re-Rendering Specification:

Rendermix

☐

Drywall Plaster

☐

No of Sq Metres

Self

☐

Subcontractor

☐

Owner

☐

Thickness of Plaster Applied: .....MM High Impact Finishing Plaster Used: .....

Description of areas treated: (i.e. Cellar, ground floor etc...) and dimensions. Include in sketch plan overleaf or on own plan.

If Sub-Contractor: Name ..... Tel No: .....

Address: .....



## TIMBER TREATMENT GUARANTEE (T.T)

Dry Rot ☐

Batch Number(s)


**r / Renewals covered if undertaken by self**

Please include copy of customer invoice to correspond with all guarantees

## Guarantee Protection Scheme

D.P.C Details		T.T Details		Dual Guarantee			
Damp Course	£ .....	Timber Treatment	£ .....		DPC	T.T	T.G
Replastering	£ .....	Timber Reinstatement	£ .....	Flat Rate	£ 60.00	£ 60.00	£ 60.00
Total	£ .....	Total	£ .....	+ VAT	£ 12.00	£ 12.00	£ 12.00
% of Total	£ .....	% of Total	£ .....	AMOUNT DUE	£ 72.00	£ 72.00	£ 72.00
+ VAT	£ .....	+ VAT	£ .....				
AMOUNT DUE	£ .....	AMOUNT DUE	£ .....				

☐ Wood Worm    ☐ Wood Rot    ☐ Rising Damp    ☐ None Known

PLEASE ENSURE THAT A COMPREHENSIVE DAMP PROOF COURSE INJECTION AND/OR TIMBER TREATMENT, AND AQUATECH/TANKIT PLAN IS COMPLETED, INC ALL DIMENSIONS BELOW:

Contractors Signature: ..... Date: .....

**PLANS OF AREAS TREATED** (TO AVOID DELAY IN PROCESSING YOUR APPLICATION PLEASE ENSURE ALL SECTIONS ARE COMPLETED)

Full

☐ Partial

**Timber Treatment:** The full extent of areas treated must be identified with a brief description if necessary.

Rising Damp Treatment and Re-rendering	
Rising Damp (Injection Only)	
Vertical DPC	
Adjoining Property	
Tanking (Slate Type)	
Raised Ground Level	
Timber Floor	

Concrete Floor  
Fungal Decay (State Type)  
Insect Attach (State Type)  
Change of floor level  
Areas of Timer Treatment ( )  
Air Vent

CF  
M( )  
E( )

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It is "contractors" responsibility to maintain copies of the sketch plan, and guarantee application form. These documents will be required in the event of a claim.

NOT TO BE COLOUR CODED. ONLY AREAS INDICATED ON THIS (OR YOUR OWN) SKETCH PLAN QUALIFY UNDER ANY GUARANTEES.

[illegible]