



GUARANTEE APPLICATION FORM

Ulverston, Cumbria, LA12 9RA Tel: 01229 869100 Fax: 01229 869101 www.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 _____ TEL No. _____
 CLIENT'S NAME (INCL INITIALS) _____ CLIENT'S TEL No. _____
 ADDRESS OF PROPERTY TREATED _____
 _____ TOWN _____
 COUNTY POST CODE CONTRACT COMPLETION DATE: D.P.C T.T CONTRACT No.
 TYPE OF GUARANTEE/S:-
 30 20 10 (YEARS) DPC TT NOTE: Only an Approved Contractor may apply for a Protection Scheme Guarantee
 PROTECTION SCHEME
 DUAL (TT 10 OR 20 YEARS ONLY)

DAMP PROOF COURSE INJECTION/TANKIT GUARANTEE

THICKNESS OF WALLS AND NUMBER OF RUNNING METRES TREATED:-
 Thickness 115mm 230mm 350mm 500mm OTHER
 (4½") (9") (13½") (18")
 Linear Metres _____ LINEAR METRES _____ SQ METRES (KX11) _____
 MATERIAL QUANTITY: INJECTION _____ AQ DPC _____ DRI-WALL _____ TANKIT _____ KX11 _____ ANTI-SULPHATE _____
 FLUID (DILUTED) CREAM BATCH NUMBER _____
 TYPE OF CONSTRUCTION (STATE CONSTRUCTION) _____
 INJECTION INTO JOINT NO YES STATE REASON _____
 INJECTION ABOVE OR BELOW JOISTS BELOW ABOVE REMOVED ISOLATED TREATED WITH TIMBER PASTE _____ LITRES
 IS INTERNAL FLOOR LEVEL LOWER THAN EXTERNAL GROUND LEVEL NO YES TANKED NO YES TYPE TANKIT AQBIT ANTI-SULPHATE
 RE-RENDERING SPECIFICATION RENDERMIX DRYWALL NO OF SQ.METRES RE-RENDERING SELF SUB-CONTRACTOR OWNER
 IF SUB CONTRACTOR: NAME _____ RESPONSIBILITY _____ TEL NO. _____
 ADDRESS _____

TIMBER TREATMENT GUARANTEE DETAILS

Treated to Eradicate: () Wood Boring Insect Wet Rot Dry Rot
 Products Used _____ Undiluted Quantities (ltrs) _____ Batch No(s) _____

If applicable who renewed defective timbers: () Self Subcontractor Owner Note: Renewals only covered if undertaken by self

Total invoice value (ex VAT) of all works including preparation and reinstatement for: _____
 *Minimum charge applicable

Please include copy of customer invoice to correspond with all guarantee details.

Guarantee Protection Scheme		Guarantee Protection Scheme	
D.P.C. DETAILS		T.T. DETAILS	
Damp Course	£ _____	Timber Treatment	£ _____
Replastering	£ _____	Timber Reinstatement	£ _____
Total	£ _____	Total	£ _____
% of Total	£ _____	% of Total	£ _____
+VAT	£ _____	+ VAT	£ _____
AMOUNT DUE	£ _____	AMOUNT DUE	£ _____

DUAL GUARANTEE	
DPC	TT
Flat Rate Fee	£ _____
+ VAT	£ _____
AMOUNT DUE	£ _____

Please indicate here areas of remedial work that may be required not covered by this application (please tick)

Woodworm Woodrot Rising Damp Wall Ties None known

False declaration on any part of this application will render any guarantee issued null and void. There shall be no refund of any premium paid in these circumstances.

When returning this application either enclose your own report quotation and plan or carefully complete the plan overleaf.

Guarantees cannot be issued until all relevant details on this form are correctly completed.

PLEASE ENSURE THAT A COMPREHENSIVE DAMP PROOF COURSE INJECTION AND/OR TIMBER TREATMENT AND TANKIT PLAN IS COMPLETED INCLUDING DIMENSIONS OVERLEAF.

CONTRACTORS SIGNATURE _____

DATE _____

