

Kendall Homes/Jacob Alexander Homes

Please scan & email to:

info@kendallhomesnw.com

WARRANTY WORK ORDER



Date: _____

Customer: _____

Address: _____

Phone: _____

Email: _____

Community Name & Lot #: _____

Service requested: _____

Applicable to 2-10 HBW Warranty Booklet, Section # _____

For office use only

To be performed by: Contractor Subcontractor

Subcontractor: _____

Contractor Rep: _____

Work performed: _____

Time of Arrival: _____ Time of Completion: _____ If materials are used please note above.

The above noted work has been completed and is satisfactory as of this date: _____

Customer Signature

Contractor/Subcontractor Rep Signature