



**Request for BlueScope Steel Warranty :  
ZINCALUME ® steel / CLEAN COLORBOND ™ steel**

Date : \_\_\_\_\_ Your Warranty Ref. number : \_\_\_\_\_  
Name of Roll Former : \_\_\_\_\_  
Address of Roll Former : \_\_\_\_\_  
Name of Roofing Contractor : \_\_\_\_\_  
Address of Roofing Contractor : \_\_\_\_\_  
Warranty to be issued to : \_\_\_\_\_  
(Name & Address) \_\_\_\_\_

**PROJECT DETAILS :**

Owner's Building Name : \_\_\_\_\_  
Owner's Building Address : \_\_\_\_\_  
Type of Building :  House  Warehouse  Factory  Others \_\_\_\_\_  
Describe activities being carried out within building : \_\_\_\_\_ [ Mandatory to state ]  
Date of Installation (Effective) : \_\_\_\_\_ Warranty Period: \_\_\_\_\_ years  
Has materials & location been inspected? ( Yes / No ) : \_\_\_\_\_ Pitch of Roof : \_\_\_\_\_  
 ZINCALUME ® steel  Others : \_\_\_\_\_  
Material Used  Clean COLORBOND ™ XRW Colour : \_\_\_\_\_  
 Clean COLORBOND ™ Ultra Colour : \_\_\_\_\_  
Area of Roof/ Wall (Please Indicate) (1) \_\_\_\_\_ m<sup>2</sup>  R /  W (2) \_\_\_\_\_ m<sup>2</sup>  R /  W  
Rollformed Product Used (Profile Name) : (1) \_\_\_\_\_ (2) \_\_\_\_\_  
Thickness - Total Coating Thickness (1) \_\_\_\_\_ mm (TCT) (2) \_\_\_\_\_ mm (TCT)  
Type of Screw Fixings Used : \_\_\_\_\_ Fastener Type AS3566 :  Class 3  Class 4  
State whether the project has a ceiling, insulation vapour barrier or nothing under the roof : \_\_\_\_\_

**FLASHING MATERIALS USED :**

ZINCALUME ® steel  Others : \_\_\_\_\_  
 Clean COLORBOND ™ XRW Colour : \_\_\_\_\_  
 Clean COLORBOND ™ Ultra Colour : \_\_\_\_\_  
Fastener Type :  Class 3  Class 4  
Are eaves exposed : \_\_\_\_\_

**CAPPING MATERIAL USED :**

ZINCALUME ® steel  Others : \_\_\_\_\_  
 Clean COLORBOND ™ XRW Colour : \_\_\_\_\_  
 Clean COLORBOND ™ Ultra Colour : \_\_\_\_\_  
Number / m<sup>2</sup> : \_\_\_\_\_

**SURROUNDING ENVIRONMENTS :**

Temperature Range : \_\_\_\_\_ °C to \_\_\_\_\_ °C Annual Rainfall : \_\_\_\_\_  
**\*\* Project is located \_\_\_\_\_ km from salt marine influence or severe industrial influence.**  
If < 5 km from salt marine influence, state if :  Calm  Surf  Rough  
Give full details of any other aggressive or unusual factors considered to influence warranty and state distance away in km : \_\_\_\_\_  
Observed performance of similar products and application in the area : \_\_\_\_\_  
Raised by , \_\_\_\_\_ Acknowledged by BSM, \_\_\_\_\_  
Name : \_\_\_\_\_ Name : \_\_\_\_\_  
Company : \_\_\_\_\_ Date : \_\_\_\_\_  
Contact : \_\_\_\_\_