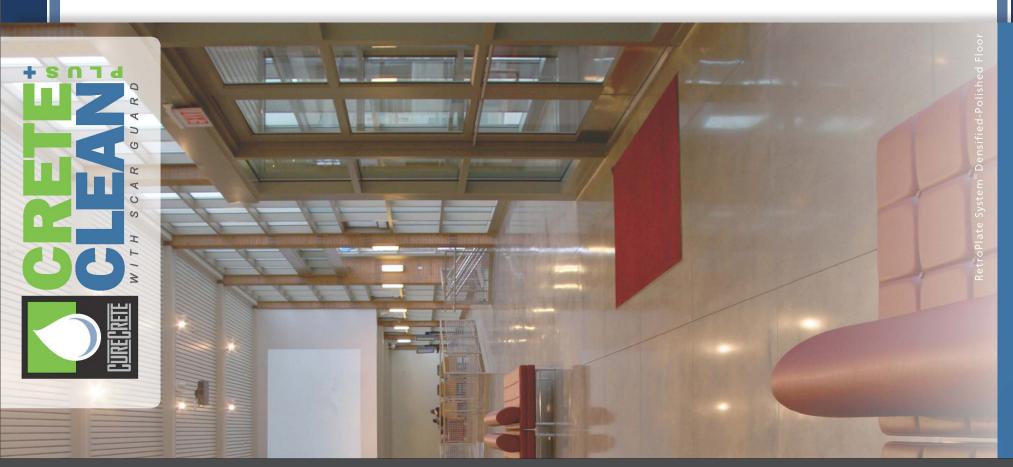


EXCLUSIVE PRODUCT WARRANTY WARRANTY CERTIFICATE & FLOOR MAINTENANCE GUIDELINES



ne TLC

ASHFORD FORMULA



For Technical Support, call 1.800.998.5664

ADVANCED FLOOR PRODUCTS

RetroPlate System® Warranty

NAME OF COMPANY

Complete warranty details provided on the reverse side of this certificate.

PROJECT INFORMATION

Owner:

Building Name:

Building Location:

 ft^2/m^2 :

Application Information

voice.

Applicator:

Applicator Address:

Representative / Int'l Distributor:

DATE WARRANTY ISSUED



VERNON TALBOT

Managing Director, Advanced Floor Products



RetroPlate® System Warranty

The applicator listed below warrants to the owner that the concrete surface described herein has been treated with the Retro Plate system and for a period of ten (IO) years commencing the date of treatment, the surface will remain hardened, dust proof and water-repellant. If the surface fails to so perform, the undersigned applicator will reapply Retro Plate to be supplied to the applicator by Advanced Floor Products.

Conditions

This warranty applies to structurally sound concrete surfaces only when treated with the Retro Plate System by a Certified Retro Plate applicator, and is void if concrete failure occurs due to improper design of the concrete, faulty workmanship or failure of materials other than those used in the Retro Plate process.

This Warranty is void if the Retro Plate maintenance specifications are not followed or if the surface is impaired or altered without written approval from Advanced Floor Products and the Certified Applicator listed below.

Limitations

Advanced Floor Products and the applicator of record shall not be liable in any respect for any damage to the building described herein, contents, other property or persons; nor will they be liable for any incidental or consequential damages, whether based upon negligence or otherwise. The provisions of this warranty shall constitute owner's exclusive remedy, and will not be deemed in force until all obligations under the original application contract have been paid.

Applicator (Print Name)	Applicator Signature
Applicator Address	Date
Project I	NFORMATION
Name of Facility	Building Owner
Facility Address	City, State/Province, Country
Square Feet / Square Meters	Invoice #