

BAMBOO FLOORING INSPECTION REPORT

Teragren / Distributor Claim #		Report Date:		Prepared by:	
When Was Issue Noticed?		Before Installation		During Installation	
				After Installation	
Date Purchased		Install Date		Distributor Inspection Date	
General Information					
Distributor: Dealers Supply			Branch:		
Retailer:			Homeowner:		
Address:			Address:		
City, St., Zip:			City, St., Zip:		
Phone:		FAX:		Phone:	
				FAX	
Contact:			Contact:		
Present at Time of Inspection		Yes		No	
Installer:		Builder:			
Address:		Address:			
City, St., Zip:		City, St., Zip:			
Phone:		FAX		Phone:	
				FAX	
Contact:		Contact:			
Present at Time of Inspection		Yes		No	
Product Information					
Style Color:			Total Square Footage:		
Run Number:			Square Footage Involved in Claim:		
ROOMS INVOLVED		Kitchen		Dining Room	
		Laundry		Other	
				Note:	
Customers Concerns					
Inspection Instructions:					
<i>All inspections are to be done in adherence to Teragren Inspection Protocol. See Teragren Inspection Manual /Claims Administration. Photos and detailed descriptions of common problems with bamboo flooring are included. Contact Teragren Claims Administration with any questions. Whenever possible have the retailer and original installer present, along with replacement material to pull any samples needed from the floor.</i>					
Site Information					
Installation Date:					
Market Segment:		Residential		Commercial	
				Sport	
Installation System		Float		Nail/Staple	
				Glue Down	
Building Type		New		Existing	
				High Rise Tilt Up Concrete	
Subfloor		Concrete		Wood	
				Other	
Exterior Grade		Above		On	
				Below	
Basement		Yes		No	
				Crawl Space	
				Yes	
				No	
Complaint Details					
Select from the following options what category best describes the issues at the residence					
Dents		Color/Grading		Color	
				Moisture	
Stains		Gaps		Cracks / Splits	
				Cupping	
Finish Peel		Rough Edges		Moldings	
				Scratches	
Dents		Maintenance		Environmental	
				Squeaks	
Floor Moves		Other - Describe:			

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Climate Conditions & Controls:													
Relative Humidity =				Temperature =				Product MC =					
Subfloor MC=				Meter Make & Model									
Climate Control		HVAC		Passive in Floor Radiant Heat				Non-Passive in Floor Radiant Heat					
Climate Control		Wood Stove		Wall Radiator				Other					
Humidifier		Yes		No		Humidifier on and Functional		Yes		No		Unknown	
Dehumidifier		Yes		No		Dehumidifier /Functional		Yes		No		Unknown	
Climate Control Operational at Time of Installation						Yes		No		Other/Temporary Controls			
Installation Method – Nail Down													
Underlayment		15 lb. felt		Aquabar “B”		Allglobe		Other/Unknown/None					
Subfloor?		Plywood		Lumber		ANSI-OSB		Other Unknown					
Subfloor to Spec for Flat		Yes		No				Other Unknown					
Invasive/Forensic Testing?		Yes		No									
Photos Taken?		Yes		No		DATE:							
Samples Submitted?		Yes		No		DATE:							
Cleat Spacing=				Expansion Space		Yes		No					
Cleat Length=				Cleat Gauge =									
Observations: Using inspection guidelines and tools. Note observations at bottom of page													
Installation Method – Glue Down System													
Adhesive System Used =				Two In One		Yes		No					
Vapor Control Component =						Yes		No					
Subfloor?		Concrete		Plywood		ANSI-OSB		Other Unknown					
Subfloor to Spec for Flat?		Yes		No				Other Unknown					
Underlayment?		Eternity		Floor Muffler		Cork		Other					
Invasive/Forensic Testing?		Yes		No									
Photos Taken?		Yes		No		DATE:							
Samples Submitted?		Yes		No		DATE:							
Proper Trowel?		Yes		No									
Good Adhesive Transfer?		Yes		No									
Floor Rolled After Install?		Yes		No									
Observations: Using inspection guidelines and tools. Note observations at bottom of page													
Note: Staples not suitable for use cleats only.													
Installation Method – Floating System													
T & G Adhesive		PVA Tongue & Groove Adhesive				Franklin T&G		Other/Unknown					
Underlayment		Eternity		Cork		Floor Muffler		Other/Unknown/None					
Subfloor?		Concrete		Plywood		ANSI-OSB		Other Unknown					
Subfloor to Spec for Flat?		Yes		No				Other Unknown					
Invasive/Forensic Testing?		Yes		No									
Photos Taken?		Yes		No		DATE:							
Samples Submitted?		Yes		No		DATE:							
Inspection Notes:													
For Additional Notes See Page 3													

Inspection Notes:

Invasive / Forensic Testing Conducted:
Please list all testing done: Removal of Boards, Moisture testing, etc.

Teragren Claims Administrator				
Product Defect		Yes	No	
Improper Installation		Yes	No	
Improper Maintenance		Yes	No	
Building Deficient		Yes	No	
Floor to Speck on all Items		Yes	No	
All Issues Resolved to Consumers Satisfaction		Yes	No	
Independent Inspector Authorized		Yes	No	

Teragren Claim determination				
<i>Claim Authorized?</i>		Yes	No	

Review - Findings Disputed:				
Independent Inspection Conducted		Yes	No	
Report Accurate & Compliant With Professional Standards		Yes	No	
Claim Authorized		Yes	No	

NOTES:

Please download claim form and email completed form to claims@dsx.com.