



WARRANTY SERVICE REQUEST FORM

PLEASE MAIL, EMAIL, OR FAX THIS FORM TO:

Mail: 9500 University Avenue, Ste. 2112
West Des Moines, Iowa 50266

E-Mail: warranty@accuratedevelopment.com

Fax: 515.327.0900

FOR OFFICE USE ONLY
Date Received: _____
Warranty Rep: _____
Request #: _____
Date Scheduled: _____

REQUEST TYPE (CHECK ONE): 30 DAY ONE-YEAR OTHER (NON-EMERGENCY)

Date of Request: _____ Closing Date: _____
 Contact Name: _____
 Address: _____
 E-Mail Address: _____
 Phone Number: _____ Alt. Phone Number: _____

DESCRIPTION OF SERVICE REQUEST:

DESCRIPTION OF SERVICE REQUEST:			FOR OFFICE USE ONLY		
	Location	Description	Warranty	Courtesy	Maintenance
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

Warranty & Courtesy indicates an item that Highland Wake Construction will service. Maintenance is an item that has been identified as a Homeowner Maintenance Responsibility or caused due to the lack thereof.

The above items have been reviewed by Accurate Development and have been assigned to our Service Representative _____, who will contact you to set up an appointment. Our technicians and/or subcontractors are available Monday thru Friday 8:00am-4:00pm only and are unavailable on weekends and Holidays. If the representative is unable to access your home, a notification to reschedule will be sent to you using the contact information you provided above.

I/We, _____ (homeowner(s)), indicated by my signature below, confirm that the above listed Service Request have been completed in their entirety and therefore accept these repairs as final satisfaction of this Warranty Service Request.

Homeowner

Accurate Development Service Representative

Date

Date