**(Cover Sheet)**

**WARRANTY BINDER**

**FOR**

**NATIONAL INSTITUTE OF HEALTH**

Project Name:Name and Address

Contract No.: XXXXXXXXXX

General Contractor: Name, Address, Phone

Contractor Project Manager: Name, Address, Phone

NIH Project Officer: Name, Address, Phone

**WARRANTY LISTING**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Tab \***  **Number** | **Spec Section** | **Product** | **Warranty Start** | **Warranty Ends** | **Responsible / e-mail address** | **POC / Phone #** |
| 1 | 033500 | Sealed Concrete Finishing | **6/19/2017** | **6/19/2022** | ABC Inc  Concrete@yahoo.com | Jack Ripple  703-217-7102 |
| 2 | 064116 | Plastic Laminate-Clad Architectural Cabinets | **6/19/2017** | **6/19/2019** | Cabinets Unlimited  Woodchuck@verizon.net | Mike Alert  814-619­-5132 |
| 3 | 068220 | High Impact Wall Panels | **6/19/2017** | **6/19/2017** | Wall Are US  services@comcast.net | Jim Clark  609-871-3384 |
| 4 | 071352 | Modified Bituminous Sheet Waterproofing | **6/19/2017** | **6/19/2022** | Pavers Inc  FlashGordan@verizon.net | Tabby Cat  202-673-7832 |

**\*Place Warranty Binder Cover Sheet, Warranty Listing and Warranties into a 3 Ring Binder with Tabs.**