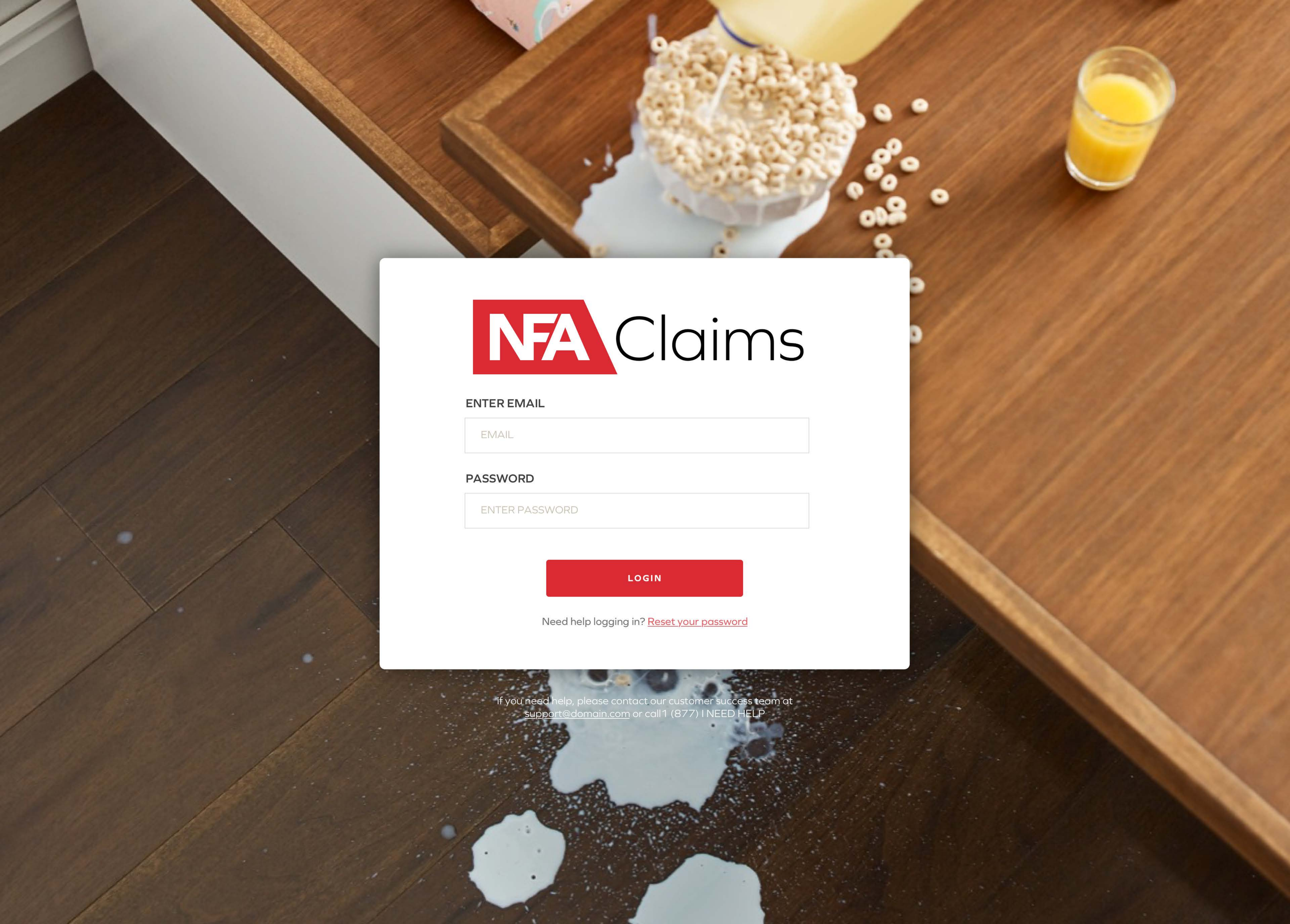

NFA Claims

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NFA Claims

WELCOME, **IAN NEWTON** (SIGN OUT)

VIEW CURRENT CLAIMS

Manufacture Claims TOTAL 9

4	4	1
Mohawk Flooring	Dreamweaver	Shaw Floors

Product Claims TOTAL 9

2	2	5
Carpet	Hardwood	Vinyl

Claim Amount TOTAL $28,804

70% Mohawk Flooring ($18,923.77)

23% DreamWeaver ($7,523.64)

7% Shaw Floors ($2,356.29)

RECENT ACTIVITY

FINE A CLAIM

RUN REPORT

CREATE A NEW CLAIM

DATE	CLAIM NUMBER	MEMBER NAME	LOCATION	MANUFACTURE	PRODUCT TYPE	DESCRIPTION	QTY	PRICE
01/02/33	**12000232-1**	inewton	backersfield	Mohawk Industries, Inc	Luxury Vinyl Plank	Beneath the underlayment, a broken pipe caused uneven planks	35 cartons	$3,434.96
01/02/33	**12000232-1**	inewton	Simi Valley	DreamWeaver	Carpet	Beneath the underlayment, a broken pipe caused uneven planks	450sqyrd	$3,434.96
01/02/33	**12000232-1**	inewton	backersfield	Mohawk Industries, Inc	Luxury Vinyl Plank	Beneath the underlayment, a broken pipe caused uneven planks	35 cartons	$3,434.96
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NFA Claims

WELCOME, **IAN NEWTON** (SIGN OUT)

VIEW CURRENT CLAIMS

Manufacture Claims	TOTAL 9	Product Claims	TOTAL 9	Claim Amount	TOTAL $28,804

RECENT ACTIVITY

FINE A CLAIM

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NFA Claims

WELCOME, **IAN NEWTON** (SIGN OUT)

VIEW CURRENT CLAIMS

Manufacture Claims	TOTAL	9
Product Claims	TOTAL	9
Claim Amount	TOTAL	$28,804

RECENT ACTIVITY

FINE A CLAIM

RUN REPORT

CREATE A NEW CLAIM

DATE	CLAIM NUMBER	MEMBER NAME	LOCATION	MANUFACTURE	PRODUCT TYPE	DESCRIPTION	QTY	PRICE
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CLAIM 12000232-1

VIEW

EDIT

DELETE

RECORD REFUND

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NFA Claims

WELCOME, **IAN NEWTON** (SIGN OUT)

VIEW CURRENT CLAIMS

SUBMIT A NEW CLAIM

CLAIM NUMBER
123-XX-57239-1

EDIT CLAIM

CHOOSE MANUFACTURE
MOHAWK INDUSTRIES, INC.

ORIGINAL INVOICE NUMBER
INVOICE NUMBER

CHOOSE PRODUCT TYPE
CHOOSE

DESCRIPTION
DESCRIPTION

ENTER PRICE
$

QTY
ENTER QTY

CUSTOMER INFORMATION

PROJECT NAME / SITE NAME
ENTER NAME

FIRST, LAST NAME
CHOOSE

PHONE
XXX-XXX-XXXX

EMAIL
YOURNAME@DOMAIN.COM

ADDRESS
1234 STREET RD

CITY
NAME CITY

STATE
ST

INSTALLATION INFORMATION

IS THIS PRODUCT DEFECTIVE?
YES NO

DATE INSTALLED
1234 STREET RD

ROOMS INVOLVED
EX: OFFICE, LOBBY, BEDROOM

FLOORS INVOLVED
EX: 2ND FLOOR, BASEMENT

SAMPLE AVAILABLE
YES NO

SPACE OCCUPIED
YES NO

INSTALLATION TYPE
STRETCH IN
PERIMETER GLUE DOWN
NAILDOWN
DOUBLE STACK
GLUE DOWN
FLOATING
LOOSE LAY
I DON'T KNOW

ADHESIVE / PRIMER / SEALER USED
TO SELECT MULTIPLE ITEMS , HOLD SHIFT AND CLICK
AD-535
AD-777
AD-888
EMPRESS

METHOD OF APPLICATION?
SELECT

SUBFLOOR INFORMATION
SELECT

UNDERLAYMENT (PAD/CUSHION) TYPE
SELECT

IS THIS PERIMETER CAULKED?
CHOOSE

UNDERLAYMENT (PAD/CUSHION) TYPE
SELECT

IS THERE A DEHUMIDIFIER OR HUMIDIFIER?
CHOOSE

IS THIS A RENTAL PROPERTY
SELECT

ORIGINAL PURCHASER?
CHOOSE

FIRST NOTICED
SELECT

CORRECTION ATTEMPTED?*
YES NO

ORIGINAL PURCHASER?
CHOOSE

TYPE OF CLEARNER?
EX: WATER/VINEGAR, DRY MOP, WET MOP

PHOTOS AND DOCUMENTATION

PLEASE UPLOAD FILE TYPES SUCH AS PDF, WORD, PNG, JPG, GIF

ATTACH PHOTOS AND/OR DOCUMENTATION, ENSURING EACH FILE IS UNDER 5MB AND THE TOTAL UPLOAD DOES NOT EXCEED 25MB.

CHOOSE FILES NO FILE CHOSEN

IF YOUR CLAIM IS SUBMITTED **WITHOUT PHOTO REFERENCES,** YOUR CLAIM MAY BE DELAYED. **SEVERAL PHOTOS ARE REQUIRED, UP-CLOSE, WITH THE FULL ROOM AND SUBFLOOR IF APPLICABLE. PLEASE ATTACH ALL CLEANING RECEIPTS IF APPLICABLE.**

SUGGESTED RESOLUTION / ADDITIONAL COMMENTS
QUESTIONS OR COMMENTS

SUBMIT CLAIM

LOREM IPSUM DOLOR SIT AMET, CONSECTETUR ADIPISCING ELIT, SED DO EIUSMOD TEMPOR INCIDIDUNT UT LABORE ET DOLORE MAGNA ALIQUA. UT ENIM AD MINIM VENIAM, QUIS NOSTRUD EXERCITATION ULLAMCO LABORIS NISI UT ALIQUIP EX EA COMMODO CONSEQUAT.

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NFA Claims

WELCOME, **IAN NEWTON** (SIGN OUT)

VIEW CURRENT CLAIMS

SUBMIT A NEW CLAIM

CLAIM NUMBER
123-XX-57239-1

EDIT CLAIM

CHOOSE MANUFACTURE

MOHAWK FLOORING INC

SHAW FLOORS

XXXX XXX XX

XX XXXX XXXXX

ORIGINAL INVOICE NUMBER

INVOICE NUMBER

CHOOSE PRODUCT TYPE

CHOOSE

ENTER PRICE

$

QTY

ENTER QTY

LOREM IPSUM DOLOR SIT AMET, CONSECTETUR ADIPISCING ELIT, SED DO EIUSMOD TEMPOR INCIDIDUNT UT LABORE ET DOLORE MAGNA ALIQUA. UT ENIM AD MINIM VENIAM, QUIS NOSTRUD EXERCITATION ULLAMCO LABORIS NISI UT ALIQUIP EX EA COMMODO CONSEQUAT.

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NFA Claims

WELCOME, **IAN NEWTON** (SIGN OUT)

VIEW CURRENT CLAIMS

YOUR PROFILE

SAVE UPDATES

FIRST NAME	LAST NAME	RETAILER
IAN	NEWTON	FLOORING 101
EMAIL	**USER ROLE**	**CONTACT NUMBER**
IANNEWTON@FLOORING101.COM	ADMIN / OWNER	(123) 456 - 6789

YOUR USERS

+ ADD USERS

ROLE	CLAIM NUMBER	USER EMAIL	CONTACT NUMBER	EDIT
ADMIN	**Mike Franklyn**	mfranklyn@flooring101.com	(123) 345 - 6789	EDIT
ADMIN	**Mike Franklyn**	mfranklyn@flooring101.com	(123) 345 - 6789	EDIT
ADMIN	**Mike Franklyn**	mfranklyn@flooring101.com	(123) 345 - 6789	EDIT
ADMIN	**Mike Franklyn**	mfranklyn@flooring101.com	(123) 345 - 6789	EDIT

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NFA Claims

WELCOME, **IAN NEWTON** (SIGN OUT)

VIEW CURRENT CLAIMS

SUBMIT A NEW CLAIM

NEW CLAIM NUMBER
123-XX-57239-1

CHOOSE MANUFACTURER: Mohawk Industries, Inc.

INVOICE NUMBER: Invoice Number

CHOOSE PRODUCT TYPE: Choose Product Type

CHOOSE CLAIM TYPE: Choose Claim Type

DESCRIPTION: Enter your discription

UNIT: Choose Unit

ENTER PRICE: $

QTY: Enter qty

TOTAL: $00.00

SAVE CLAIM

LOREM IPSUM DOLOR SIT AMET, CONSECTETUR ADIPISCING ELIT, SED DO EIUSMOD TEMPOR INCIDIDUNT UT LABORE ET DOLORE MAGNA ALIQUA. UT ENIM AD MINIM VENIAM, QUIS NOSTRUD EXERCITATION ULLAMCO LABORIS NISI UT ALIQUIP EX EA COMMODO CONSEQUAT.

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NFA Claims

WELCOME, **IAN NEWTON** (SIGN OUT)

VIEW CURRENT CLAIMS

UPDATING CLAIM

CLAIM NUMBER
123-XX-57239-1

CHOOSE MANUFACTURER: Mohawk Industries, Inc.

INVOICE NUMBER: 120-335-555

CHOOSE PRODUCT TYPE: Hardwood Flooring

CHOOSE CLAIM TYPE: Installation

DESCRIPTION: The installer didn't put underlayment under the product which caused buckelling

UNIT: Carton

ENTER PRICE: $ 49.99

QTY: 20

TOTAL: $3566.32

UPDATE CLAIM

CLAIM TRACKING

CLAIMS ANALYST: Choose Analyst

CHOOSE LOCATION: Choose Location

FIRST, LAST NAME: choose

PHONE: xxx-xxx-xxxx

EMAIL: yourname@domain.com

ADDRESS: 1234 street rd

CITY: Name City

STATE: ST

CUSTOMER INFO

FIRST, LAST NAME: choose

PHONE: xxx-xxx-xxxx

EMAIL: yourname@domain.com

ADDRESS: 1234 street rd

CITY: Name City

STATE: ST

PROJECT NAME: Enter Project Name

BUILDER NAME: Enter Builder Name

UNIT LOT: Lot Number

INSTALLATION INFORMATION

DATE INSTALLED: xx/xx/xxx

FIRST NOTICED: xx / xx / xxxx

SPACE OCCUPIED: YES NO

ROOMS INVOLVED: ex: office, lobby, bedroom

FLOORS INVOLVED: ex: 2nd floor, basement

METHOD OF APPLICATION?: select

INSTALLATION TYPE:
- STRETCH IN
- PERIMETER GLUE DOWN
- NAILDOWN
- DOUBLE STACK
- GLUE DOWN
- FLOATING
- LOOSE LAY
- I DON'T KNOW

ADHESIVE / PRIMER / SEALER USED
TO SELECT MULTIPLE ITEMS , HOLD SHIFT AND CLICK
- AD-535
- AD-777
- AD-888
- EMPRESS

UNDERLAYMENT (PAD/CUSHION) TYPE: EX: Foam, Cork, Rubber, ECT.

SUBFLOOR INFORMATION: EX: Wood, Concrete, Existing Vinyl, ECT.

ORIGINAL PURCHASER*: YES NO

IS THERE A DEHUMIDIFIER OR HUMIDIFIER?: YES NO

CORRECTION ATTEMPTED?: YES NO

TYPE OF CLEARNER?: ex: water/vinegar, dry mop, wet mop

FREQUENCY OF CLEANING: ex: water/vinegar, dry mop, wet mop

PHOTOS AND DOCUMENTATION

PLEASE UPLOAD FILE TYPES SUCH AS PDF, WORD, PNG, JPG, GIF

ATTACH PHOTOS AND/OR DOCUMENTATION, ENSURING EACH FILE IS UNDER 5MB AND THE TOTAL UPLOAD DOES NOT EXCEED 25MB.

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SUGGESTED RESOLUTION / ADDITIONAL COMMENTS: questions or comments

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