



# NORTHRIDGE H O M E S

1424 North Brown Road, Suite 100, Lawrenceville, GA 30043  
Warranty Fax: 770-963-1402 | Email: warranty@mynorthridgehomes.com

## Warranty Request Form

Dear Homeowner:

This request form is provided to you for 45 day and 11 month service request. Please email or fax it to the address listed above. Prior to submitting this request form, please carefully review the 2-10 Homebuyers' Warranty Booklet you received at your contract signing or closing. Fill out this form completely, providing all information requested.

Thank you for your co-operation

Northridge Homes Warranty Department

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_ Closing Date: \_\_\_\_\_

Address: \_\_\_\_\_

Community: \_\_\_\_\_ Lot No. \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Service Requested

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
15. \_\_\_\_\_

**If you mail your Warranty Request Form, please retain a copy for your records.**