



Warranty Transfer Application

Property Transferred From:

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____

ZIP: _____

PHONE 1: _____

PHONE 2: _____

EMAIL: _____

Property Transferred To:

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____

ZIP: _____

PHONE 1: _____

PHONE 2: _____

EMAIL: _____

PROPERTY TRANSFER DATE: _____

TRANSFER OF WARRANTY TERMS

In order to transfer warranty to 2nd property owner, this form must be completed within 90 days with proof of purchase or property transfer and mailed or dropped off to our corporate headquarters with a check made payable to **ADVANCED WINDOW SYSTEMS, LLC or credit card for \$400.00 to cover warranty transfer handling costs.**

Warranted by

Advanced Window Systems, LLC

14 ALCAP RIDGE

CROMWELL, CT 06416

www.advancedwindowsystems.com