Wawanesa Insurance

Roofing Installation Information and Certification for Consideration of the Superior Roof Discount

NOTICE TO HOMEOWNERS: The completion of this certificate may entitle you to receive a discount on your homeowners premium. This certification is for the purposes of Wawanesa Mutual Insurance Company and is not to provide any expressed or implied warranty by the manufacturer, supplier, installer or Wawanesa Mutual Insurance.

Please refer to your Insurance Broker for further conditions of this discount.

INSURED NAME(S)

INSURED ADDRESS

CITY | PROVINCE | POSTAL CODE

HOME PHONE NUMBER | WORK PHONE NUMBER | OTHER PHONE NUMBER

POLICY NUMBER

ROOFING COMPANY

STREET ADDRESS

CITY | PROVINCE | POSTAL CODE

PHONE NUMBER | WEBSITE

LICENSE NUMBER

MANUFACTURER'S NAME

CLASS 4 ☐

YEAR MANUFACTURED | BRAND NAME | PRODUCT COLOUR

DATE OF INSTALLATION

I hereby certify that I have inspected or installed, in accordance with the manufacturer's specifications on the above described residence, a roof shingle, tile, panel, sheet, etc. as of the date of installation. The material complies with Underwriters' Laboratory Standard 2218, Impact Standard for Standards for Impact Resistant Testing of Rigid Roofing Materials by Impacting Freezer Ice Balls and the roof covering has not been overlaid onto existing roof material (other than qualifying metal roofs) and is free of defects or damage, including hail.

I also certify that proper labeling of either UL Standard 2218 Classification or FM Standard 4473 classification of the materials.

ORIGINAL SIGNATURE OF ROOFING COMPANY'S AUTHORIZED REPRESENTATIVE | DATE

Any intentional misrepresentation relating to the completion or presentation of this form constitutes fraud.