**(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 Ripple703-217-7102  |
| 2  | 064116  | Plastic Laminate-Clad Architectural Cabinets  | **6/19/2017**  | **6/19/2019**  | Cabinets Unlimited Woodchuck@verizon.net | Mike Alert814-619­-5132  |
| 3 | 068220  | High Impact Wall Panels  | **6/19/2017**  | **6/19/2017**  | Wall Are USservices@comcast.net  | Jim Clark 609-871-3384  |
| 4 | 071352  | Modified Bituminous Sheet Waterproofing  | **6/19/2017**  | **6/19/2022**  | Pavers IncFlashGordan@verizon.net | Tabby Cat202-673-7832 |

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