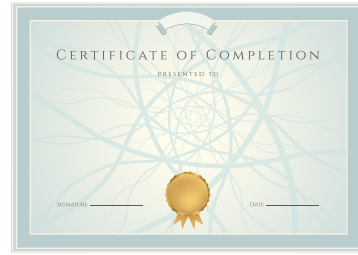




3544 WATERFIELD PKWY
 LAKELAND, FL 33803 USA
 Office: 863-667-1805
 Toll Free" 1 (800) 608-5699



**APPLICATION FORM FOR FLAME
 RETARDANCY CERTIFICATE**

Please print information legibly. Date Applied _____

Which product was applied: (Please specify: Fabric Shield, Wood Shield, etc.) _____

What is being treated? Please describe: _____

How many pieces and /or square ft. Please describe: _____

Number of coats applied per side: _____

APPLICATION INFORMATION:

Under what name should the certificate be issued to?: _____

What address should be on the certificate?

Address: _____ City: _____ St: _____ Zip: _____

Print Name of Person or Company who applied treatment: _____

By signing, I agree that I have read the instructional letter(s) supplied by the manufacture outlining the application(s) of supplied "flame retardant" product(s). I also affirm that the aforementioned retardant(s) have been applied to the material(s) specified in this application in a manner compliant to the manufacturer's specification(s) and in doing so have complied with all state and federal law(s). Finally, I alone assume all and/or any responsibility, financial or otherwise, for misapplied product(s) or failure of said product(s) due to any negligence of application instruction(s).

(Applicator) Name, Title/Position: _____

Signed: _____

Phone Number: _____ Date: _____

Print Name of Person that witnessed application: _____

Signed: _____

Phone Number: _____ Date: _____

By what route shall the certificate of Application be sent?

Send by E-mail address (Secure PDF format): _____ @ _____

Send by Fax: number: _____

Please mail copy to _____

** Please fax to (863) 667-1729, mail to above address, or e-mail: info@universalfiresshield.com.

Original copies are kept on file. All forms must be signed and dated. **