

LIVE OAK CONSTRUCTION

6838 Greenwood Dr. Corpus Christi, TX 78415
OFFICE: 361-854-1626 FAX: 361-853-4696

WARRANTY SERVICE REQUEST

WARRANTY SERVICE REQUEST
____ 30 DAY LIST
____ EMERGENCY FOLLOW UP
____ OTHER

With the exception of specified emergencies, all requests for service must be in writing. Please use this form to notify us of any warranty items. Mail to Live Oak Construction, Inc., 6838 Greenwood Dr., Corpus Christi, Texas 78415. ATTN: WARRANTY MANAGER. We will contact you to set an inspection appointment. Service appointments are available from 8 am to 4 pm, Monday through Friday.

NOTE: Please be sure you include all items on this one Request Form; list any items incomplete from Inspection Checklist.

THANK YOU FOR YOUR COOPERATION

NAME: _____ DATE: _____

ADDRESS: _____ COMMUNITY: _____

PHONE/HOME: _____ LOT: _____

WORK: _____ PLAN: _____

WORK: _____ CLOSING DATE: _____

SERVICE REQUESTED SERVICE ACTION

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

COMMENTS: _____

HOMEOWNER SIGNATURE: _____

*****ATTENTION: NO FURTHER CHECKS WILL BE ISSUED UNTIL THE WORK IS COMPLETE, WARRANTY FORM IS RETURNED TO THE OFFICE WITH HOMEOWNERS SIGNATURE.*****

DO NOT WRITE BELOW THIS LINE

WARRANTY SERVICE REQUEST LIST COMPLETED DATE: _____

HOMEOWNERS SIGNATURE _____

WARRANTY MANAGER SIGNATURE _____

****THIS SIGNIFIES THAT ALL WORK IS COMPLETE****