

BUILDINGSOLUTIONS®

Residential Builder Rebate Submission Form

Complete this form and mail with your Proof of Purchase to:
 CertainTeed LLC, Building Solutions Residential Builder Program, 20 Moores Road, Malvern, PA 19355

| COMPANY INFORMATION | | | |
|---------------------|--|------------------|--|
| Builder Name | <input style="width: 95%;" type="text"/> | Distributor Name | <input style="width: 95%;" type="text"/> |
| Address | <input style="width: 95%;" type="text"/> | Distributor Name | <input style="width: 95%;" type="text"/> |
| City, State & Zip | <input style="width: 95%;" type="text"/> | Distributor Name | <input style="width: 95%;" type="text"/> |
| Phone Number | <input style="width: 95%;" type="text"/> | | |
| Fax Number | <input style="width: 95%;" type="text"/> | | |
| E-Mail Address | <input style="width: 95%;" type="text"/> | | |

| REBATE INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| <p><i>Indicate the period of time covering the proof of purchase and installation (month/year)</i></p> <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: right;"> Start Date <input style="width: 100px;" type="text"/> </div> <div style="text-align: right;"> End Date <input style="width: 100px;" type="text"/> </div> </div> <p style="margin-top: 20px;"><i>Indicate CertainTeed Products you are submitting a rebate for along with quantities and number of homes. Note: Avg. Quantities may not be necessary if a flat/per home rebate is in effect. Insert n/a for flat rate.</i></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;"></th> <th style="width: 40%; text-align: left; font-size: small;">Enter Name of Product (i.e. Landmark Roofing Shingles; MainStreet Siding)</th> <th style="width: 15%; text-align: center; font-size: small;">Avg. Qty. Installed/Home</th> <th style="width: 15%; text-align: center; font-size: small;">Include Unit of Measure Alongside Qty.</th> <th style="width: 15%; text-align: center; font-size: small;">No. of Homes</th> </tr> </thead> <tbody> <tr> <td>CertainTeed Product</td> <td><input style="width: 95%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> </tr> <tr> <td>CertainTeed Product</td> <td><input style="width: 95%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> </tr> <tr> <td>CertainTeed Product</td> <td><input style="width: 95%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> </tr> <tr> <td>CertainTeed Product</td> <td><input style="width: 95%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> </tr> <tr> <td>CertainTeed Product</td> <td><input style="width: 95%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> <td><input style="width: 80%;" type="text"/></td> </tr> </tbody> </table> <p style="margin-top: 20px; font-size: small;"><i>The person completing this form must print and sign their name in the spaces provided below.</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr style="background-color: #f2f2f2;"> <th style="width: 40%; text-align: left; padding: 5px;">PREPARED BY: Please Print Name</th> <th style="width: 35%; text-align: left; padding: 5px;">PREPARED BY: Signature</th> <th style="width: 25%; text-align: left; padding: 5px;">DATE</th> </tr> <tr> <td style="height: 40px;"></td> <td></td> <td></td> </tr> </table> | | | | | | Enter Name of Product (i.e. Landmark Roofing Shingles; MainStreet Siding) | Avg. Qty. Installed/Home | Include Unit of Measure Alongside Qty. | No. of Homes | CertainTeed Product | <input style="width: 95%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | CertainTeed Product | <input style="width: 95%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | CertainTeed Product | <input style="width: 95%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | CertainTeed Product | <input style="width: 95%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | CertainTeed Product | <input style="width: 95%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | <input style="width: 80%;" type="text"/> | PREPARED BY: Please Print Name | PREPARED BY: Signature | DATE | | | |
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