

Galliant Solid Hardwood Floors Full Residential Warranty Registration

To register your warranty, please complete the registration form below and return it to Galliant Inc. together with the original sales receipt or invoice within 45 days of the purchase.

Please mail your completed warranty registration to:

Galliant Inc.
P.O. Box 43188
325 Central Parkway West
Mississauga, Ontario
L5B 4A7

Please type or print

Name of Purchaser: _____

Home Address: _____

Telephone: _____ Fax: _____

1. Date of purchase: _____ (D/M/Y)

2. Name of product purchased: _____

3. Price paid (per square foot excluding applicable taxes): _____

4. Where purchased: _____ (Name of store)

_____ (Address)

_____ (Telephone)

5. Name of Installer: _____ Telephone: _____

6. Total square feet installed in home: _____

7. Rooms / Areas installed: _____

8. Type of Home: _____; Age: _____; Value: _____

9. No. of People in Household: Adults: _____; Ages: _____

Children: _____; Ages: _____

10. No. of Pets in Household: Dogs: _____; Cats: _____

Others: _____ (please specify)