



CeDUR™
3590 Himalaya Road
Aurora, CO, 80011
(844) 974-9196

CeDUR™
Completion of Work (COW)

Contractor Name: \_\_\_\_\_ Date: \_\_\_\_\_
Contractor Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_
Project Manager: \_\_\_\_\_ Phone: \_\_\_\_\_
Distributor (Name/Location): \_\_\_\_\_

Property Owner Name: \_\_\_\_\_
Property Address: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Lead Source: \_\_\_ Representative \_\_\_ Advertisement \_\_\_ Internal \_\_\_ Website
\_\_\_ Internet \_\_\_ Other (Please List) \_\_\_\_\_

New Construction: Y/N Re-Roof: Y/N Addition: Y/N
Existing Roof Type (if applicable): \_\_\_\_\_ # of Stories: \_\_\_\_\_

Completion Date: \_\_\_\_\_ Color: \_\_\_\_\_

Number of Squares: \_\_\_\_\_ Exposure: \_\_\_\_\_ Staggered Butt: Y/N

Roof Deck Type: \_\_\_\_\_

\*\*\* Must Include \*\*\*

- 1 copy of the distributor invoice
□ At least 1 photo of the street view of property after installation

\*\*\* Please Sign \*\*\*

- I acknowledge I have received and reviewed the CeDUR installation instructions prior to installation.
□ I acknowledge all materials have been installed per CeDUR installation instructions.

Completed By: \_\_\_\_\_ Signature: \_\_\_\_\_

\*\*\*Must submit within 90 days of job completion\*\*\*
\*\*\*Submit to Info@CeDUR.com\*\*\*