



PO BOX 120296
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1-800-PAINTING
Lisa@mdfpainting.com

Touch Up Request Form

If attention is needed to any areas covered under our Warranty, complete this form and mail to our office in the envelope provided. We will contact you to schedule a convenient time to meet with you.

Date: ____/____/____

Customer Name: _____

Daytime Phone: () _____ - _____

Foreman: _____

Alternate Phone: () _____ - _____

Address: _____

Areas needing attention:

Color

1.	
2.	
3.	
4.	
5.	
6.	
7.	

The above noted areas have been completed to my satisfaction under the terms of my warranty.

Customer Signature _____

Date Completed _____

Foreman Signature _____