



SERVICE/WARRANTY REQUEST FORM

NAME / HOMEOWNER _____

ADDRESS / PROJECT LOCATION _____

CITY _____

STATE _____

ZIP _____

PHONE _____

EMAIL (REQUIRED) _____

PROJECT # (IF APPLICABLE) _____

GATE CODE (IF APPLICABLE) _____

VESSEL

☐ POOL ☐ SPA ☐ GROTTO ☐ SLIDE ☐ BOULDERS ☐ WATER FEATURE
☐ OTHER _____

TYPE OF CONCERN (SELECT ALL THAT MAY APPLY)

☐ DISCOLORATION / STAINING
☐ TEXTURE / ROUGH
☐ LEAK(S)
☐ CRACK(S)
☐ OTHER _____

WHEN DID YOU FIRST NOTICE THIS ISSUE?

MONTH / DAY / YEAR _____

WERE YOU A DIRECT CUSTOMER OF MMG OR DID YOU USE A POOL CONTRACTOR?

☐ CUSTOMER ☐ CONTRACTOR (COMPANY) _____

IF CONTRACTOR, HAVE THEY BEEN NOTIFIED OF THIS CONCERN?

☐ YES ☐ NO

IF YES, WHEN? _____

WHAT IS YOUR CURRENT POOL MAINTENANCE SERVICE?

☐ WEEKLY ☐ BI-WEEKLY ☐ MONTHLY

DO YOU SERVICE YOUR OWN POOL? YES ☐ NO ☐

IF NO, WHO SERVICES YOUR POOL (COMPANY) _____

BRIEF DESCRIPTION OF CONCERN:

PLEASE EMAIL THIS FORM AND SUPPLEMENTAL PHOTOS TO MARRISA@MMGTX.COM