



**WALL FINISH
PROFESSIONALS**

Warranty Registration Form

Suzuka® Strato® Textured Paint

Thank you for choosing SUZUKA®. To activate your warranty, please complete this form and submit it within **30 days** of project completion, along with the required documents.

PROJECT DETAILS

Project Owner Name

Phone Number

Email Address

Project Address

PRODUCT & PURCHASING DETAILS

Product(s) Used (Name & Code)

Date of Purchase

Retailer / Distributor

APPLICATION DETAILS

First Date of Application

Last Date of Application

Applicator Company (if any)

Applicator Contact

Method of Application

Substrate Type

Sealer Used

Topcoat Used (if applicable)

Number of Coats Applied

Total SQF / SQM

Skim Coat Brand

Batch (lot) Number(s)

(Please provide photos)

Additional Notes :
(optional)

APPLICATOR DECLARATION

☐

I hereby confirm that the paint application was carried out in accordance with Suzuka's guidelines for surface preparation and installation.

Name _____

Company _____

Date _____

(Signature)



Submission Instructions

Email the completed form and all supporting documents/photos to:

warranty@suzuka.com.my

Subject: **Warranty Registration – [Your Project Name]**



Photo Submission Guidelines

Please include clear photos of the following:

- Photos of batch (lot) number of products
- Receipts of all purchases
- Substrate before application
- Priming process
- During application (1 – 2 angles)
- Completed surface (wide shot & close-up)