

Send this completed form to Progressive Home Warranty within ten (10) years from the Completion Date listed on the Declaration page.

**Progressive Home Warranty**

325 Carleton Dr  
St Albert, AB T8N 7L1

Phone: 1-866-957-2314  
Fax: 1-855-825-3992

**YOU MUST COMPLETE AND SUBMIT THIS FORM NO LATER THAN  
10 (TEN) YEARS AFTER THE COMPLETION DATE LISTED ON THE DECLARATION PAGE.**

Warranty Certificate Number

Possession Date: MM / DD / YYYY

Certificate Holder Information

Name(s)

Email Address

Mailing Address (If the location of the home is different than your mailing address entered above, please provide the warranted homes' address)

Phone (Home)

Phone (Work)

Fax

Please list any tenth year warranty Major Structural Defects in the box below. If you require more space, please attach and number additional pages to this document.

**Major Structural Defects:**

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Home Owner Signature

Home Owner Signature (if applicable)

Date of Signature: MM/DD/YYYY

**Please submit this form upon completion to Progressive Home Warranty**