

# WINDOW/SIDING INSTALLATION CERTIFICATION

Manufacturer: \_\_\_\_\_

Brand name / model: \_\_\_\_\_

Job Address: \_\_\_\_\_

Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ cell: \_\_\_\_\_

Email: \_\_\_\_\_

I, the undersigned, hereby certify that the  window  siding system on the building at the above address will be installed in accordance with manufacturer's instructions.

\_\_\_\_\_  
Signature of authorized representative Date

**INSTALLATION CERTIFICATION MUST BE LEFT AT THE JOB SITE WITH PERMIT AFTER COMPLETION OF WORK AND BEFORE FINAL INSPECTION.**

**A final approval of permit will not be given until this form is completed, signed, and witnessed by the building inspector.**