



MI Windows and Doors, Inc.
Supplemental Labor Limited Warranty
Professional 5000, Builders Series, HomeMaker II and Regal View

To the extent covered by the Assurance Warranty, Owner(s) with Professional 5000, Builders Series, HomeMaker II or Regal View Series products installed in their single family home (non-commercial) shall receive delivery of necessary replacement component(s) and skilled labor (provided or arranged by MIWD) required for the installation of component parts and insulated glass units (“IGU”) at no charge. This supplement does not cover the cost of equipment necessary to access the products or any labor/materials required for repairing/restoring of adjacent surfaces. As a condition to any obligation of MIWD, at the time service is requested, owner must provide accurate order numbers as found on the Warranty Information label applied to the head of each operable window. This addendum is not transferrable or assignable and does not cover labor to replace IGU’s in fixed picture window units or architectural shapes. All other terms and conditions of the MIWD Homeowner Assurance Limited Warranty are incorporated herein.

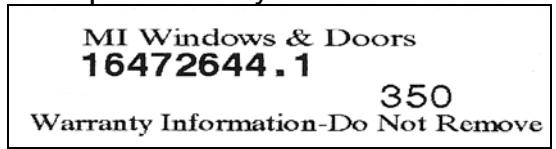
*Labor in Canada is limited to 2 years from the date of product manufacture.

REQUIRED CLAIMS PROCEDURE:

Please submit your warranty claim, including proof of Ownership and details of nature and extent of defect to: MI Windows and Doors, 7555 E. State Rt. 69 Prescott Valley, AZ 86314. Attention: Customer Care. Or E-mail a completed, scanned form to customercareswest@miwd.com. For further information regarding this warranty please call 888-417-1162.

In order to properly identify your unique window the claim must also contain the factory window order number from the window warranty label. This label is found in the head of the window (See Example Below). Failure to provide the order number will result in a \$75 measure and inspect fee necessary to determine the correct parts needed to service your window.

Example Warranty Label with order #:



Insert Order # of Your Window:

Please complete form:

Owner(s):			
Address:	City:	State:	Zip:
Phone:	Fax:	Email:	
Dealer Name:			