



Since 1996

**ALSTON INC.**

*Quality . Beauty . Longevity .™*

## **BEFORE INSTALLATION**

# STOP!

**PRIOR** to installation, the Installer/Owner, should perform a detailed product quality inspection. The Installer/Owner has the final inspection responsibility as to Grade, Style, Color, Variations and Finishes of the products. If the flooring is not acceptable for any reason at the time of this final inspection, please do **NOT** install the flooring and contact the seller or **ALSTON INC.** immediately and we will exchange the material or refund you the money.

**ALSTON INC. WILL NOT BE RESPONSIBLE FOR FLOORING WITH VISUAL DEFECTS AFTER IT HAS BEEN INSTALLED.**

\*PLEASE READ THE INSTALLATION/WARRANTY INFORMATION INSIDE THIS BOX, PERFORM THE MOISTURE TEST **PRIOR** TO THE ACTUAL INSTALLATION.

(AFP-801)

## **SUB-FLOOR MOISTURE TEST**

MUST BE **PERFORMED** AND **RECORDED** ONTO THE CONCRETE **PRIOR** TO THE ACTUAL INSTALLATION OF “**ALSTON**” FLOORING.  
**FAILURE TO DO SO WILL VOID THE WARRANTY.**

### **ALSTON INCORPORATED**

21487 Ferrero Parkway • City of Industry, CA 91789 • U.S.A. • Tel (909) 718-0336 • Fax (909) 718-0388

[www.AlstonFlooring.com](http://www.AlstonFlooring.com)

[www.AlstonInc.com](http://www.AlstonInc.com)

[www.AlstonCarvings.com](http://www.AlstonCarvings.com)



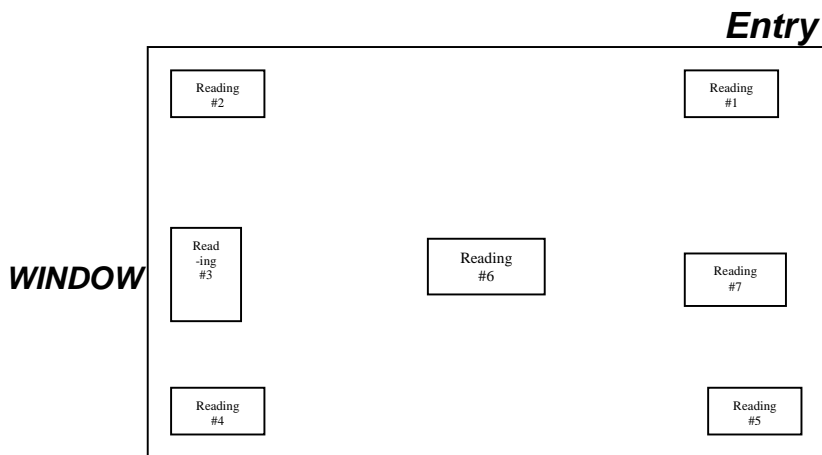
Since 1996

**ALSTON INC.**

*Quality . Beauty . Longevity .™*

## Sub-Floor Moisture Test Record

In each room of the locations specified as diagram below, please take pencil and draw box around the concrete moisture meter. **Write Meter Reading and Date inside each box onto the concrete slab prior to actual installation.** (4 corners; Middle of Room; In front of doors & windows; plus at least one additional reading are required)



*\*Calcium Chloride test is recommended if area is susceptible to moisture. (Example: outside flower planter next to wall or grade with improper slope.)*

Customer Name: \_\_\_\_\_

Installer's Name/Company: \_\_\_\_\_

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

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

City: \_\_\_\_\_ St.: \_\_\_\_\_ Zip: \_\_\_\_\_

City: \_\_\_\_\_ St.: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Product Purchased: \_\_\_\_\_

Inv. #: \_\_\_\_\_ Inv. Date: \_\_\_\_\_

Date of Test: \_\_\_\_\_ Installation Date: \_\_\_\_\_

Tested By: \_\_\_\_\_

Type of Test Performed: \_\_\_\_\_

Square Footage of Installation: \_\_\_\_\_

Was any type of sealer used on the sub-floor before installation?  Yes  No

If so, what type of sealer was used?: \_\_\_\_\_

Was a moisture barrier installed?:  Yes  No

If so, what type and thickness was used?: \_\_\_\_\_

**In the event that there is a moisture-related claim filed with us, we must have this record on file for all installations performed over concrete slabs, we will exam the meter readings on the slabs. Prior to installation, please complete the information above, keep one for your record and mail or fax this form back to **ALSTON INC.** along with a copy of the Original Invoice and Warranty Registration Card.**

**ALSTON INCORPORATED**

21487 Ferrero Parkway • City of Industry, CA 91789 • U.S.A. • Tel (909) 718-0336 • Fax (909) 718-0388

[www.AlstonFlooring.com](http://www.AlstonFlooring.com)

[www.AlstonInc.com](http://www.AlstonInc.com)

[www.AlstonCarvings.com](http://www.AlstonCarvings.com)