

The following claim form can be used to anticipate the types of information collected by your carpet inspector:

DATE:	<input type="text"/>	<input type="text"/>	<input type="text"/>	COMMISSIONER:	Agent:
PH #		Ext. :		FAX #:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	CLAIM #	INVOICE .#	INVOICE DATE FAX#

<input type="text"/>	DATE REC'D:	<input type="text"/>	<input type="text"/>	<input type="text"/>	CONSUMER CONTACT DATE:	<input type="text"/>	<input type="text"/>	<input type="text"/>	INSPECTION
DATE:	<input type="text"/>	<input type="text"/>	<input type="text"/>	STATEMENT #		DATE TODAY:	<input type="text"/>		


<b>BASIC INFORMATION</b>	
Consumer: _____	Tel: Home ( ) _____
	Work ( ) _____
Retailer/Distributor: _____	Attn: _____ Tel ( ) _____
Address: _____	City: _____ State: _____ Zip: _____
Address: _____	City: _____ State: _____ Zip: _____
Reported problem: _____	

**PRODUCT DESCRIPTION**

Style

Residential

Commercial

Color

Cut Pile  Loop Pile

FIBER:

Nylon  Olefin

Polyester  Wool

PATTERN/WEIGHT:

Secondary Backing

- ActionBac  Jute  
 Attached Cushion  Other

Size

Square Yards

ROLL#

WARRANTY:

AMOUNT (Involved  
in complaint):

GRADE:

DATE INSTALLED

 -  - 

DYE LOT NUMBER:

Other Information:

**INSTALLATION PROFILE**

Date of Retailer Inspection --

Distributor Inspection --

Manufacturers Rep --

INSTALLER NAME

Installation date

--

Date Complaint First Reported --

INSTALLATION TYPE:  DIY  Professional

Installation Method  Stretch-in  Power  
Stretcher  Knee Kicker

Direct Glue  Double Stick  Loose Lay  Perimeter Glue

Other:

SEAMS SEALED?  Yes  No

Carpet padding Type  Rebond  Prime Urethane  Flat Rubber  
 Jute/hair  Synthetic hair  Waffle  Other (specify )

SUBFLOOR TYPE  Wood  Concrete  Tile  
 Vinyl

Installation Quality

Excellent  Good  Fair  Poor

**USE / ENVIRONMENTAL CONSIDERATIONS**

Heat: Type/Heating: \_\_\_\_\_ Air Cond: Y or

N Evaporative Cooling: Y or N

Vacuuming: Times/Week: \_\_\_\_\_

Type of Vacuum: FORMCHECKBOX Canister FORMCHECKBOX Upright

FORMCHECKBOX Other: \_\_\_\_\_

FORMCHECKBOX Carpet Tool(s): \_\_\_\_\_

Condition of Vacuum: \_\_\_\_\_

Cleaning: No./Times: \_\_\_\_\_ FORMCHECKBOX Professional

Methods used: \_\_\_\_\_ Last Cleaning Date: / /

No./Times: \_\_\_\_\_ FORMCHECKBOX

Consumer Methods used: \_\_\_\_\_ Last Cleaning Date: / /

Spotting: Type/Spill: \_\_\_\_\_

Reagents Used: \_\_\_\_\_ Tool(s) Used: \_\_\_\_\_

Traffic: No./Adults: \_\_\_\_\_ No./Children: \_\_\_\_\_

No./Pets/Kind \_\_\_\_\_ Other: \_\_\_\_\_

Inspector Comments/Observations (Be Specific)

---

*WARNING ! You must not discuss any of your opinions or information about this inspection with the consumer! This is confidential! You are only there to collect information and give it to the commissioning agent, NO ONE ELSE!!*

*Problems Related to Installatiuon*

PROBLEM	PROCEDURE	PROBLEM	PROCEDURE	PROBLEM	PROCEDURE
1. Adhesive Won't Hold	G	19. Low Lines	L	38. Shift Marks	L
2. Air Filtration	R	20. Matting/Crushing & Packing	V & C	39. Sidematch	A
3. Bowing/Skewing	B	21. Missing Tufts	H	40. Spots, (white or light) w/ color loss	R
4. Carpet Won't Clean	C	22. Odor, Carpet or Pad	T	41. Spots, orange / peach color	R
5. Cornrowing	C	23. Oil (Machinery or Loom)	N	42. Spots, mysterious	R
6. Delamination	D	24. Pad Shrinkage / Expansion	P	43. Soiling	C
7. Dye Lot Variance	A	25. Pattern Match	B	44. Stains (darker)	R
8. Excessive Lubricant	C	26. Performance, Poor	V	45. Stop mark	L
9. Fading,	J	27. Pile Reversal	O	46. Streaks	L
10. Fading, Ozone	J	28. Pilling	V	47. Texture Change	K
11. Footprints / Tracking	M	29. Pooling / Watermarking	O	48. Tuft Bind	S
12. Foreign Yarn	F	30. Raveling	E	49. Unstable (soft back)	D & Q
13. Fuzzing, Bearding	V	31. Restretch	Q	50. Wear (performance)	V
14. High Lines	J	32. Roll Crush Bands	X	51. Wrinkles, Buckles	D & Q
15. Hole(s) in carpet	H	33. Seam Delamination	D & E	52. Yellowing	R

16. Indentations	M	34. Seam Pile Dark, Distorted	I	53. Zig zag lines	F
17. Lines, Lengthwise	L	35. Shading	O & W		
18. Lines, Widthwise	L	36. Shedding	V		

A

1. Is color difference still visible after viewing from all three positions along both sides of seam?
2. Is pile direction same on both sides of seam?
3. Is seam peaked, overlapped, or gapped?
4. Is there pile crush on one side?
5. Does one entire panel look darker?

Lighter?

6. If loop (or berber) are loops bigger on one side of seam?

B

1. Is the pattern distorted like a bow across the width?
2. How much is bow measurement off in the center from what it should be?
3. Is pattern at an angle from left to right with one side edge shifted up?
4. What is the measurement of difference up on one edge of seam from what it should be?

C

1. Location
2. Is carpet soiled?
3. Rub with a dry, then a wet, white cloth. If there a transfer? The color is?

4. Use a small amount of water and agitate with the thumb. Is there a sticky soap / chemical residue?

#### D

1. Are only seams delaminating?
2. Are tufts missing or raveling at seams?
3. Are seam edges sealed?
4. Surface tension loose? Wrinkles?
5. Pull back small corner (closet?) with awl.
6. Is there is hole in primary back?
7. Is carpet soft and flimsy?
8. Does backing peel off easily?
9. Less than 2 1/2 lbs. pressure?

#### E

1. Look for a bead of adhesive (sealer) on seam edges.
2. Is delamination only at seams?

#### F

1. Zig-zag, straight line, or spot?
2. Is entire tuft a different color?
3. Location?
4. How long? How many?

#### G

1. Location?
2. Loose surface tension, bubbles?
3. Is enough adhesive on floor?
4. How much adhesive transferred to back?
5. Trowel notch (marks) size?

H

1. Location?
2. Size? How many?
3. Yarn void (missing tufts)?
4. Are needle holes in primary backing?
5. Is primary backing torn?
6. A hole completely through carpet?

I

1. Is yarn pile in seam area distorted?
2. Is just width of seam tape showing?
3. Is distortion lighter or darker?

J

1. Location?
2. Is color loss just on tips?

3. Overall or just near windows  
(sunlight)?
4. Check under furniture leg for  
original color down in pile.
5. Compare against scrap of unused  
carpet.
6. Pull six tufts and get 3" x 5"  
unused sample. Mail in.

K

1. Is there "shading" along one side  
of seam?
2. Are the loops or pile larger or  
thicker?
3. Is this change visible along seams  
only?
4. Is the pile crushed here and  
reflecting light differently?
5. Where is this condition located  
(one room? throughout?)

## L

1. Lengthwise or widthwise?
2. How wide, one tuft or more like a  
band of more than one tuft?
3. How long?
4. How many?
5. Low or high? Neither?
6. Are these dye or colored yarn  
streaks?

## M

1. Report what the consumer expect  
to see.
2. Report what you visually see.
3. Is carpet indented? Why is it?
4. Has the pad compressed or failed?
5. If this is a glue down installation  
are indentations from high heeled  
shoes?

## N

1. Widthwise or lengthwise?
2. Just spots?

3. Size / Length?
4. How many?
5. Location?
6. When first noticed?
7. Blot with white towel.

Any transfer?

8. Is it sticky like oil?

O

1. Location?
2. Shape? Irregular or serpentine?
3. Size?
4. In traffic lanes, pivot points or random?
5. Does it look darker from one angle and light from another?
6. Does it look like spilled water?

P

1. Is pad up and over tack strip?
2. Was pad tape used?
3. Was pad glued or stapled to floor?

## Q

1. Is surface tension loose?
2. Wrinkles?
3. Location?
4. Was all furniture removed?
5. Was carpet power stretched?
6. Are there elongated holes in backing?
7. Are there repair plugs at vents & doors?
8. Pull back corner, is it soft or delaminated?
9. Send one foot sample.

## R

1. When first noticed?
2. Location?
3. Color?
4. How many?
5. Size & shape?
6. Is there a pattern?
7. Only on the tips?

8. Test with U.V. light. The color is?
9. Rub with dry and wet cloth.
10. Color of transfer to cloth?
11. Ask... what was dropped?
12. Did they try to clean? With what?
13. Disappear when they clean, then  
reappear?
14. Any teenagers or swimming pool?
15. For yellowing only: Stick thumb  
in your mouth. Hold in-on  
yellowing for one minute. Or use  
citric acid. Does yellowing  
disappear?
16. Pull affected tufts (min. 4) & mail in.

S

1. Are tufts protruding above pile  
surface?
2. Where are they?
3. How many?
4. Are they loose or locked in?
5. Check vacuum for rough edges on  
bar.
6. If missing tufts, are needle holes in  
primary backing?

7. Get one foot sample and mail in.

T

1. Do you notice an odor?
2. Have room(s) been closed up?
3. Ask... when first noticed?
4. Is odor just as strong today?
5. What are customer's symptoms?
6. Have they seen a doctor?

U

1. Is seam... gapped, overlapped, depressed, peaked, or delaminated?
2. Is yarn stuffed down in between edges?
3. Miss yarn or raveling?
4. Are seams tightly butted?
5. Within industry standards?

V

1. Location?
2. Compare traffic to non traffic. Are yarn tips untwisting? How much (%)?
3. Filament slippage or bearding?

4. Check for yarn bundle  
encapsulation, saturation, and  
penetration (%)?
5. Can you brush up pile with hand?
6. Mail in complete "V" tufts  
(4 min.) and/or 3" x 5" scrap.

W

1. Location?
2. Is yarn laying over?
3. Is pile crushed flat?
4. Is light reflection different?

X

1. Location?
2. How many?
3. Widthwise or lengthwise?
4. Feel it... is pile reversed?
5. Can steaming and pile brushing  
correct? (no if olefin)

Your answers to the above A-X

---

---

INCLUDED WITH THIS REPORT

SAMPLES: FORMCHECKBOX CARPET FORMCHECKBOX CUSHION FORMCHECKBOX  
TUFTS/BACKING FORMCHECKBOX ADHESIVES FORMCHECKBOX FIBER

FORMCHECKBOX DIAGRAMS \_\_\_\_\_ FORMCHECKBOX ILLUSTRATION  
\_\_\_\_\_ FORMCHECKBOX PHOTOS \_\_\_\_\_

FORMCHECKBOX TAPE RECORDING FORMCHECKBOX  
LETTER(S) FORMCHECKBOX LAB REQUEST / REPORT

FORMCHECKBOX INDUSTRY STANDARDS / RESEARCH DATA FORMCHECKBOX FIELD REFERENCE  
GUIDE WORKSHEETS FORMCHECKBOX OTHER: \_\_\_\_\_

Inspector signature: \_\_\_\_\_ Print name:  
\_\_\_\_\_

Date: / /

Firm:

---

Phone: ( ) \_\_\_\_\_

Address:

---

---

*Additional information on supplementary page(s)*

FORMCHECKBOX Yes

FORMCHECKBOX No

No# of pages attached: \_\_\_\_\_