

QCP Project Certification Request Form

ORDER AT LEAST TWO WEEKS PRIOR TO FABRICATION

1. Enter Project Information:

QCP Number: _____ **Indicate QCP Contract Amt:** _____

Project Name: _____ \$ _____

Address: _____

Woodworker: _____ **Calculate Fee:** (Contr Amt X .0050)

Address: _____ **Certification Fee:** \$ _____

Phone: _____ Fax: _____ **Note: \$ 500 Minimum Fee**

2. Indicate Certification Scope:

In accordance with the provisions of the Q-agreement between AWI QCC and our company, we request **certification labels** and/or **certificates of compliance** for the following sections identified by **C (Custom)** or **P (Premium)** next to the listing.

Quantity Certificates of Compliance: _____ **Estimated Completion Date:** _____

<u>Grade</u>	<u>Qty</u>	<u>OSI Section</u>	<u>Grade</u>	<u>Qty</u>	<u>OSI Section</u>
P C	_____	300 - Standing & Running Trim	P C	_____	1000 - Windows
P C	_____	400 - Architectural Cabinets	P C	_____	1100 - Screens
P C	_____	500 - Paneling	P C	_____	1200 - Blinds & Shutters
P C	_____	600 - Closet & Utility Shelving	P C	_____	1300 - Flush Doors
P C	_____	700 - Ornamental Work	P C	_____	1400 - Stile & Rail Doors
P C	_____	800 - Stairwork & Rails	P C	_____	1500 - Factory Finishing
P C	_____	900 - Door Frames	P C	_____	1600 - Modular Cabinets
			P C	_____	1700 - Installation

<u>Grade</u>	<u>Fab/Inst</u>	<u>Qty</u>	<u>AWS Section</u>
P C	F I	_____	5 - Factory Finishing
P C	F I	_____	6 - Millwork
P C	F I	_____	7 - Stairwork & Rails
P C	F I	_____	8 - Wall Surfacing
P C	F I	_____	9 - Architectural Doors
P C	F I	_____	10 - Casework
P C	F I	_____	11 - Countertops
P C	F I	_____	12 - Historic Restoration

3. Indicate Current Project Status:

Awarded to WW _____ **Shop Drawing** _____ **Fabrication** _____ **Finishing** _____ **Delivering** _____ **Installing** _____

If any work being certified by your firm will be supplied by other sources, list them below:

Woodworker: _____ Finisher: _____

To be Installed by: Woodworker _____ GC _____ Carpenter Installer _____, Other(list) _____

4. Certification Statement:

Our firm certifies that the work described above complies with the Standards as applicable to the requirements of the above-referenced project, evidenced by authorized signature below.

Name: _____ Signature: _____

5. Payment Methods: Payment must be submitted along with this application.

Make Checks Payable to AWI Quality Certification Corporation

Or, Pay online with a credit card: <http://www.awiqcp.org/label/Orderlabels.asp>.

