Hi Tech Refinishing Inc.

PO Box 405147

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# Residential Release Form

Name of Person residing in the home where work is being completed:

Address where work is being completed:

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Resident Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Description (counter, tub, etc.):

**Due to the use of paints and chemicals needed to perform the job, we must ask that a release of liability be read and signed by the Resident. After you have read and understand the following steps required of you, please sign, and return to our office staff.**

1. Please make arrangements for any and all pets to be out of the home on day of job.
2. Please make arrangements for any and all persons to be out of the unit on day of job.
3. Please make arrangements for fish tanks to be tightly covered to prevent exposure to any airborne dust or chemicals.
4. Remove any and all objects in the room in which the work is being performed. This includes, but is not limited to pots,

pans, food, pictures, phones, computers, stereos, money, plants, clothes, etc…;everything;

1. The refinishing process will create lightweight dust. Even with the precautions that we, as well as you take, it will be impossible to completely eliminate the presence of dust.
2. You will want to leave some windows and doors open to help with the strong chemical smell. This smell can dissipate quickly with proper ventilation.
3. As different people have different levels of sensitivities to certain chemicals and their odors, we must ask that you make the appropriate decision regarding the time at which you feel comfortable to re-enter or re-occupy your home.
4. Please allow at least 24 hours for surface to dry before using or placing items on them.
5. Do not use bleach, comet, Ajax, soft scrub (with bleach), green pads, etc to clean surface. 409 or fantastic with a soft cloth will be all you need. Please do not use suction cup mats on the surface of the tub. These two items void the warranty of the surface.
6. A Quality Control Technician will return the next business day to remove all paper, caulk in where necessary and collect check.

**I have read and fully understand all requirements, responsibilities, and warnings as stated above. I hereby release Hi Tech Refinishing Inc. and its owners, from all liabilities resulting from my failure to do any of the above stated requirements.**

Resident’s Signature: Date: