**Metro Stone Warranty Registration Form**

To register your warranty, please scan and e-mail to **sales@metrostone.com****.**

Name:

Address (Where is installed):

City: State: Post Code:

Home Phone: Mobile Phone:

Email:

Metro Stone supplied by

1. Retailer or Builder
2. And/or Stonemason

Installation Date:

Color Name: Color Number:

Product Use:

 Kitchen Bench Top Kitchen Backsplash Bathroom

 Wall Lining Bathroom Vanity Other

* If you would prefer not to receive our marketing communications, please indicate your refusal by ticking this box.