UK TrexPro Candidate Application

Please Type or Print Clearly
* Indicates REQUIRED Information

*Applicant Name: _____

*Company: _____

*Address: _____

*City:_____ *Country: _____ *Postcode: _____

*Phone # (Business): _____ Phone # (Mobile): _____

 Website: _____ *Email: _____

*Preferred Method of Contact--*Call, text or email*:_____

*Average Number of decks built per year_____ *How many are Trex?_____

*Who is your Trex stockist (where do you buy Trex at)? _____

*Does your company carry General Liability Insurance? ☐ Yes ☐ No

 Policy Number(s): _____

 Carrier: _____

*Insurance Agent Name: _____ *Agent's Phone #: _____

I have been presented with the TrexPro Overview which outlines the features and benefits of the TrexPro program. I understand I must register my customer's warranties to maintain my status as a TrexPro.

I certify that all the information stated above is true and accurate. I understand that acceptance into this program is at Trex Company, Inc.'s sole and absolute discretion.

For valuable consideration, the sufficiency of which is acknowledged, the applicant agrees to defend, indemnify and hold Trex Company, Inc. ("Trex Company") harmless from and against any claims, liabilities, losses, damages or expenses (including but not limited to attorney's fees and costs) arising directly or indirectly from, as a result of, or in connection with, (a) Trex Company having referred said applicant to any party requesting a referral of a TrexPro™ Contractor, and/or (b) the performance, acts or omissions of said applicant in connection with contracting services provided to any party.

Applicant Name (please print): _____

Signature of Applicant: _____ Date: _____

Email completed application to:	Todd Phariss, TrexPro Program Manager, tphariss@trex.com