

June 29, 2021

Mastic Warranty Claims  
Ply Gem Siding Group  
303 W Major Street  
Kearney, MO 64060-8551

Attached is the warranty claim form for the Ply Gem synthetic roof tiles installed on my home, the roofer installation contract, Ply Gem warranty, and requested photos.

Background information:

Following hurricane Irma in September of 2017 the Bridge-Way Villas Homeowners Association modified the covenant regulations that previously stated only natural slate tiles were permissible for roofs. Having received multiple presentations from Dave Derogatis, Director of Composites, Ply Gem Industries Inc., the board approved the Ply Gem synthetic slate as an alternative with a color combination consisting of equal amounts of Jade, Sienna, Harvest, and Russet. Over a period from early 2018 to mid 2019 twenty eight (28) homes in our community installed Ply Gem synthetic slate roofs and all are experiencing fading issues to different degrees. I would like to have an on-site visit from a representative of your company, be it employee, supplier, or roofing contractor for an inspection and discussion of this issue.

A complete roof replacement appears to be the only satisfactory solution to this problem. Providing only the cost of materials for the individual defective tiles would not be acceptable to me.

I would also like to know the answers to the following questions:

- Is Cornerstone Building Brands aware of this problem?
- Will other tiles experience fading in the future?
- Are you aware that individual tiles can not be easily replaced due to the Ply Gem installation instructions, i.e. overlapping tiles with 4 nails, compromise of the underlayment seal should a tile be removed?
- How is it possible to replace defective tiles when you no longer manufacture them?
- Are the faded tiles restricted to a particular color or batch?
- Will faded tiles also experience material failure as a result of the lack of UV pro?

Sincerely,

Michael Griner,  
619 Bridgeway LN  
Naples, FL 34108

Tel: 239-592-5989  
email: [mwgriner@gmail.com](mailto:mwgriner@gmail.com)

Fax No 866.694.9046  
8 pages including cover letter

Neighbors roof showing left section with many faded tiles vs unfaded right section



Front left side of my house



Front side of my house



Front right side of my house



Right back side side of my house



Back right side of my house



Back left side of my house



Back left side of my house



Closeup 1 of faded tiles



Closeup 2 of faded tiles



Closeup 3 of faded tiles



Image of house number



**PLY GEM SIDING GROUP - ROOFING DAMAGE REPORT**  
(Please type or print legibly)

**HOMEOWNER NAME:** MICHAEL W. GRINER  
619 BRIDGEWAY LN. NAPLES FL 34108  
 Street Address (No PO Box) City State Zip Code  
COLLIER (239) 592-5989 ( )  
 County Home Phone Number Work Phone Number

**CLAIM IS LOCATED AT ABOVE ADDRESS:** Yes  No  IF NO PROVIDE ADDRESS BELOW:  
 Street Address City State Zip Code

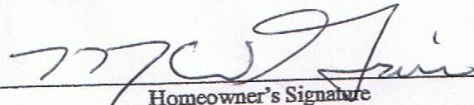
**OBSERVED PROBLEM:** Leaking  Fade  Other   
**DESCRIBE CONDITION:** ROOF TILES ARE FADING IN EXCESS OF  
4 HUNTER UNITS

**DATE PROBLEM FIRST NOTICED:** 11/1/2021  
**DID THE PROBLEM OCCUR AFTER A STORM?** Yes  No   
**IF SO, WHAT TYPE OF STORM?** Wind  Hail  Snow   
 Other: \_\_\_\_\_

**TYPE OF PRODUCT:** Country Cedar Shake  HomeCrest  Unknown  SYNTHETIC SLATE  
**INSTALLATION DATE:** 5/31/2018  
**ARE YOU THE ORIGINAL HOMEOWNER:** Yes  No   
**IF NO, DO YOU KNOW THE NAME OF THE PREVIOUS OWNER?** \_\_\_\_\_

**CONTRACTOR WHO INSTALLED YOUR METAL ROOF:**  
CMR CONSTRUCTION & ROOFING Unknown  
 Name  
170 25TH AVE NW NAPLES FL 33410  
 Street Address City State Zip Code

Ply Gem, reserves the right to make an inspection of your home at any time, should we need to verify the usage of our product. Ply Gem, also reserves the right to pursue legal action on "fraudulent claims." I certify all the information above is true to the best of my knowledge.

 6/28/21  
 Homeowner's Signature Date

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Note: If leaking, please tarp to prevent damage until claim can be resolved.



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 170 25th Ave NW • Naples, FL 34120  
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 Office (855) 766-3267 • Fax (855) 376-6326  
 CCC1327587

### AGREEMENT

Name Mike Griner	Insurance Co. Frontline	Date
Address 619 Bridgeway Ln	Mortgage Co.	Account #
City, State, Zip Code Naples, FL 34108	Adjuster	Claim #
Phone # Hm. _____ Wk. _____	Representative Danny McCloud	Cell # 440-862-2547

### SPECIFICATIONS

**ROOF** Per Insurance Scope

Tear off:  Yes  No 1 # layers roofing

Install Underlayment:  15lb  30lb  Synthetic Polyglass MTS

Install: Plygem Brand Shingles

Style: Slate Year: 50

Color: Bridgeway Blend #SOs: 40

Install new Drip Edge: 3 x 3 Color: Bronze

Install Lead Jacks: 1.5 2' 1 3" 4 5"

Vents: 6" Goosenecks Color: Bronze

Valley:  Open  Closed Type: \_\_\_\_\_

Ridge: Plygem Ridgevent: ( Y / N ) 0 LF

Roof Pitch: 6 / 12 #Stories: 2

Open Soffit:  Yes  No Vaulted Ceilings:  Yes  No

Redeck:  Yes  No

**GUTTERS & DOWNSPOUTS** Per Insurance Scope

Remove & Replace \_\_\_\_\_ LF 5" Gutters \_\_\_\_\_ LF 2x3 Downspouts

Remove & Replace 180 LF 6" Gutters 40 LF 3x4 Downspouts

Color: White Install Leaf Screens:  Yes  No

PAYMENT SCHEDULE	
Agreement Amount	\$ _____ or RCV
Roofing	\$ <u>49063.58</u>
Gutters	\$ <u>1740.16</u>
Other	\$ _____
Supplements	\$ _____
Overhead and Profit	\$ _____
Final Agreement Amount	\$ <u>50,889.70</u>
Balance Due for Each Trade is Due in Full Upon its Completion	

**SIDING** Per Insurance Scope

Brand: \_\_\_\_\_ # SOs: \_\_\_\_\_

Style: \_\_\_\_\_ Color: \_\_\_\_\_

Replace Elevations:  Front  Rear  Left  Right

Trim Color: \_\_\_\_\_ #Stories: \_\_\_\_\_

Replace Fascia: \_\_\_\_\_ LF # Window Wraps: \_\_\_\_\_

**DAMAGED WOOD (Replaced as needed at additional cost)**

Remove & Replace Plywood Decking @ \$75.00 / sheet

Remove & Replace 1x Decking @ \$7.00 / LF

Remove & Replace Fascia @ \$7.00 / LF (Painting Additional)

**WARRANTY**

Steep Slope 5 yr Workmanship Warranty

Low Slope 2 yr Workmanship Warranty

Siding 10 yr Workmanship Warranty

Gutters 10 yr Workmanship Warranty

**ADDITIONAL SPECIFICATIONS**

Placement of Materials: \_\_\_\_\_

Emergency Repairs: N/A

Existing Interior Damage:  Yes  No \_\_\_\_\_

Roll yard and Driveway with magnetic nail sweeper

Clean up and haul away work debris

**SPECIAL INSTRUCTIONS**

Will follow addendum of specifications provided by Mr. Griner about the installation of Plygem materials

1/3 WHEN WE START, 1/3 WHEN THE INSTALLATION OF THE ROOFING STARTS, BALANCE DUE UPON COMPLETION

**Subject to Insurance Approval**  
 Terms for Insurance Work Only: This agreement does not obligate the Property Owner or CMR unless it is approved by your Insurance Company and accepted by CMR. By signing the Agreement, you authorize CMR to pursue your best interests at a price agreeable to your Insurance Company and CMR, without any cost to you except for your insurance deductible for the work scope approved by your Insurance Company, provided you have full replacement cost coverage. Supplemental claims billed by CMR on your behalf and approved by your Insurance Company for additional work or cost increases will become part of this agreement. Any upgrades or additional work requested by you and not approved by your Insurance Company will be your financial responsibility. By signing this Agreement, Property Owner acknowledges CMR Construction & Roofing as a General Contractor and as such will be entitled to 10% Overhead & 10% Profit as allowed by insurance industry standards. \_\_\_\_\_ Initials

By signing this Agreement, it is understood and agreed that CMR and/or CMR's insurer will be held harmless for alleged or actual damages / claims as a result of mold, algae or fungus; it is understood that CMR and its insurers will exclude all coverage, including Defense, damages related to bodily injury, property damage and clean-up caused directly or indirectly or in whole or in part for any action brought by mold, including fungus and mildew regardless of the cost, event, material, product or workmanship that may have contributed concurrently or in any sequence to the injury or damage that occurs.

IN WITNESS WHEREOF Buyer(s) acknowledge receipt of a completed copy of this Agreement on the day and year written below. I / WE have read, understand and accept the terms included on the front and back of this Agreement

Approved by Customer on date: 5-18-2018 Customer Signature [Signature]

Approved by CMR on date: 5 / 8 / 2018 CMR Sales Rep Signature [Signature]