



# Dow Customer Color Match Program Request and Approval Form



**Notice to the Submitter:** Each color request for each product requires a separate form. Return a completed form and a 3" square substrate sample (if substrate is solid-colored), or a color chip (if the substrate is multi-colored). Brilliant hues or metallic colors may not be matchable. Retain a copy of this form for your Records.

**Send to:** Dow Silicones Corporation  
Attn: Custom Color Department  
760 Hodgenville Road.  
Elizabethtown, KY 42701  
Phone: (270) 706-8358  
Fax: (270) 706-8359

For other product information or technical service:  
(800) 322-8723 or (989) 496-6000

**A custom color matched sample will be returned to you for your approval. For a Sealant request, this will consist of 2 cured 3" X 3" samples, unless a wet sample is requested below. DOWSIL™ AllGuard Silicone Elastomeric Coating samples will consist of one-pint sample, unless only a formula is requested. DOWSIL™ 123 Silicone Seal samples will consist of one 4" to 6" strip. All samples will be returned by express mail.**

Date \_\_\_\_\_  
Submitter's Name \_\_\_\_\_ Phone \_\_\_\_\_ Contact Fax \_\_\_\_\_  
Contact Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_  
Company \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Address Line 1 \_\_\_\_\_ City \_\_\_\_\_  
Address Line 2 \_\_\_\_\_ Country \_\_\_\_\_

### Additional Information

Project/Job Name \_\_\_\_\_  
Product \_\_\_\_\_  
Substrate/Color Ref# \_\_\_\_\_  
Volume/Estimate \_\_\_\_\_  
Sq. Ft./Estimate \_\_\_\_\_  
Linear Ft/Estimate \_\_\_\_\_

### Product Needing Matched:

- DOWSIL™ AllGuard Silicone Elastomeric Coating
- DOWSIL™ 123 Silicone
- DOWSIL™ 756 SMS Building Sealant
- DOWSIL™ 790 Silicone Building Sealant
- DOWSIL™ 795 Silicone Building Sealant
- DOWSIL™ 999-A Silicone Glazing Sealant
- Other, Please specify \_\_\_\_\_

Container to Order:  Cartridge  Sausage  Pail

Wet Sample:  Yes  No

Distributor's Name \_\_\_\_\_

Location \_\_\_\_\_

Dow Sales Representative \_\_\_\_\_

Special Instructions \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email Address \_\_\_\_\_

Return Name \_\_\_\_\_

and Address \_\_\_\_\_



**To Approve a Color Match and Place an Order:** There will be acceptance and approval of a color match when the customer returns the Color Request and Approval form with an approval signature or an order is placed with the "Color Match I.D. Code" which will be provided once the color match is completed. To place an order, call your Dow distributor. **The Color Match I.D. Code MUST be indicated with the order.**

**The Color Lab will:** Return to you a color match as described above in a timely manner. Along with the color-matched sample, you will receive a Dow Custom Color Request and Approval Form. If you have any questions or concerns about this color match, please contact the Color Lab at +1 (270) 706-8358 and request the Color Technician referenced at the Color Matched By portion of the form.

Customer Approval Signature \_\_\_\_\_ Title \_\_\_\_\_  
 Color Match I.D. Code \_\_\_\_\_ Approval Date \_\_\_\_\_

**If Rejected:**

Customer (Architect or Building Owner) Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Reason for Rejection: \_\_\_\_\_