

BCI Bath and Shower Initial Dispute Notice

First Name:* _____

Last Name:* _____

Street Address:* _____

City:* _____

State:* _____

Zip Code:* _____

Email Address:* _____

Telephone Number:* _____

Description of Dispute:* _____

Desired Outcome: _____

Mail or Email Notice to: BCI Acrylic, Inc.
Initial Dispute Notice
1800 Industrial Dr.
Libertyville, IL 60048
[Customer Care](#)

(Denotes *Required fields)