

PROJECT INFORMATION									
Project Name:									
Address:			City:			State:		Zip:	
No. of buildings:		Total Squares:		Roof Slope:	Height:		Width:		Length:
Status: Secured Bid			Start Date:			Bid Date:			
BUILDING OWNER									
Company/Owner Name:						Contact:			
Address:			City:			State:		Zip:	
Phone:				Email Address:					
CONTRACTOR									
Company/Owner Name:						Contact:			
Address:			City:			State:		Zip:	
Phone:				Email Address:					
ARCHITECT/CONSULTANT									
Company Name:						Contact:			
Address:			City:			State:		Zip:	
Phone:				Email Address:					
DOCUMENTS REQUIRED									
Submittal Express		Cut Spec			Design Line			System Letter	
For Submittal Express, do you need: Data Sheets SDS Sheets Contractor Letter Other:				Do you need hard copies? Yes No # of copies: Bound Unbound			Do you need samples? Yes No # of samples:		
Send packages to:					Contact:				
Address:			City:			State:		Zip:	
Phone:				Email Address:					
GUARANTEE INFORMATION									
Guarantee Type:							Term (in years):		
CODE APPROVALS									
Is this building FM insured? Yes No		Do you need other code approvals?			FBC	Miami-Dade		UL	
Other:									
Please provide required design pressure or classification/assembly number:									

System Components

Existing Deck or Substrate:

Existing Coating? Yes No

Type:

Insulation Layer 1:

Thickness:

Insulation Layer 2:

Thickness:

Cleaner:

Primer/Rust Inhibitor:

Ponding Treatment/Deck Repair:

Seam Treatment:

Details/Penetrations:

Full Fabric? Yes No

Product:

Coating Layer 1:

Rate of Application:

Color:

Coating Layer 2:

Rate of Application:

Color:

Coating Layer 3:

Rate of Application:

Color:

Coating Layer 4:

Rate of Application:

Color:

Additional surfacing and/or overburden:

Additional Notes/Comments: