

DO THE CONTRACT DOCUMENTS CONTAIN DESIGN PRESSURES?

YES

NO IF YES, PLEASE ATTACH TO THIS REQUEST SO CORRECT FASTENING PATTERNS CAN BE SPECIFIED.

Phone: 877-423-7663 opt. 4, opt. 3 Email: designservices@gaf.com

REQUEST DATE:
DATE NEEDED:
TERRITORY MANAGER:

LOW SLOPE PROJEC	CT INFORMATIO	N								
PROJECT NAME:										
ADDRESS:	ADDRESS:			CITY:				STATE:		ZIP:
NO. OF BUILDINGS:	TOTAL SQUARES:		ROOF SLOPE:		HEIGHT:		WIDTH:		LENGTH:	
STATUS:	SECURED BIDDING		IG	START DATE:			BID DATE:			
BUILDING OWNER										
COMPANY/OWNER NAME:				CONTA	NCT:					
ADDRESS:				CITY:				STATE:	STATE: ZIP:	
PHONE: EMAIL ADDRES										
CONTRACTOR										
COMPANY/OWNER NAME:					NCT:					
ADDRESS:					CITY:			STATE:		ZIP:
PHONE:	PHONE: EMAIL ADDRESS:									
ARCHITECT/CONSULTA	ANT									
COMPANY/OWNER NAME:				CONTA	CONTACT:					
ADDRESS:					CITY:			STATE:		ZIP:
PHONE: EMAIL ADDRESS:										
DOCUMENTS REQUIRE	D									
SUBMITTAL EXPRESS CUT SPEC GUI			GUIDE SPI	ASSEMBLY RENDERING				ASSEMBLY LETTER		
FOR SUBMITTAL EXPRESS, DO YO		?	DO YOU NEED HARD COPIES (BO						DO YOU NEED SAMPLES?	
DATA SHEETS SDS SHEETS			" OF CODIFC.			YES NO			YES NO	
CONTRACTOR CERTIFICATION LETTER STANDARD DETAILS			# OF COPIES:	BOUND UNBOUND				# OF SAMPLES:		
SEND PACKAGES TO:					CONTAC	T:				
ADDRESS:					CITY:			STATE:		ZIP:
PHONE:					EMAIL ADDRESS:					
GUARANTEE INFORMA	ΓΙΟΝ									
GUARANTEE TYPE:							TERM (IN Y	EARS):		
ADDENDUMS										
WIND RIDER MPH:			WELLRO	OF		SO	LAR			
HAIL SIZE: 1" 2" 3"			VAPOR S	OR SEAL		LIVEROOF				
PUNCTURE – MAN HOUR COVERAGE 16 32			STEEP SLOPE			GRO				
			KYMAX			OT	HER:			
CODE APPROVALS										
IS THE BUILDING FM INSURED?	YES	NO DO YOU	J NEED OTHER CODE	APPROVA	LS?	FBC	MIAMI-DADE	UL CLASS	6 A	В С
IF YES, PROVIDE ROOFNAV # OR	REQUIRED DESIGN PRESS	SURE:			A	SSEMBLY # (Or design press	SURE:		_

ROOF SYSTEM INFORMATION											
CONSTRUCTION TYPE:			COLD STORAGE:	DECK TYPE:	GAUGE:	THICKNESS:					
NEW TEAR-OFF	YES NO										
FOR RECOVER OR PARTIAL TEAR-OFF, LIS	T EXISTING COMPONEN	ITS TO REMAIN:									
VAPOR RETARDER:	SEPARATOR SHEE	 T:	FIRE BARRIER:		ANCHOR SHEET	ANOHOD SHEET.					
			THE DARRIER. ANOHOR SHEET.								
INSULATION/ROOF BOARD		THOMASON (DOI		4774 01111	ENT (DRODUOT AND D	ATE OF ARRUNATIONS					
TYPE THICKNESS/PSI			ATTACHMENT (PRODUCT AND RATE OF APPL								
2.											
3.											
4.											
ADDITIONAL NOTES ON INSULATION OR A	DDITIONAL LAYERS:										
ROOF MEMBRANE											
SINGLE-PLY M	EMRDANE		ACDITALTICATION DITABLES								
SPECIFICATION NUMBER:	LINDIANE		ASPHALTIC/MOD BIT/BUR SPECIFICATION NUMBER:								
INTERPLY 1 AND ATTACHMENT:			BASE PLY:								
INTERPLY 2 AND ATTACHMENT:			ATTACHMENT:								
TYPE:	BACKING:		INTERPLY:		QUANTITY:						
TPO EXTREME TPO	SMOOT	H FLEECE BACK	INVIERTET.		Q0/11/11						
PVC PVC XK	SELF-AD	DHERED	ATTACHMENT:								
COLOR:	SHEET WIDTH:	THICKNESS:	CAP SHEET OR SURFACING:								
ATTACHMENT METHOD: RHINOBON											
ATTACHMENT METHOD: RHINOBOND SELF-ADHERED MECHANICALLY ATTACHED ADHERED			COLOR/TYPE:								
BALLASTED			ATTACHMENT:								
ATTACHMENT			FLASHING MEMBRANE:								
FLASHING MEMBRANE:	FLASHING ATTACHMENT:										
	GAF Perimeter Edge Metal is REQUIRED for 30 & 35 year warranties and any										
ADDITIONAL ITEMS	wind addendum 100 mph or greater										
SURFACING/OVERBURDEN:			GAF PERIMETER EDGE I	METAL:							
LIQUID APPLIED											
EXISTING DECK OR SUBSTRATE: EXISTING COATING? YES NO TYPE:			CLEANER:		PRIMER/RUST INHIBITOR:						
PONDING TREATMENT/DECK REPAIR:	SEAM TREATMENT:										
DETAILS/PENETRATIONS:	FULL FABRIC? YES NO										
	PRODUCT:										
COATING LAYER 1:	COATING LAYER 2:										
RATE OF APPLICATION:	RATE OF APPLICATION: COLOR:										
COATING LAYER 3:	COATING LAYER 4:										
RATE OF APPLICATION:	RATE OF APPLICATION: COLOR:										
ADDITIONAL SURFACING AND/OR OVERBU	JRDEN::										
ADDITIONAL NOTES/COMME	NTS:										
ADDITIONAL NOTEO/ COMME											