

### STEEP SLOPE: PROJECT INFORMATION

PROJECT NAME:					
ADDRESS:			CITY:		STATE: ZIP:
NO. OF BUILDINGS:	TOTAL SQUARES:	ROOF SLOPE:	HEIGHT:	WIDTH:	LENGTH:
STATUS:	<input type="checkbox"/> SECURED	<input type="checkbox"/> BIDDING	START DATE:	BID DATE:	

### BUILDING OWNER

COMPANY/OWNER NAME:			CONTACT:		
ADDRESS:			CITY:		STATE: ZIP:
PHONE:		EMAIL:			

### CONTRACTOR

COMPANY/OWNER NAME:			CONTACT:		
ADDRESS:			CITY:		STATE: ZIP:
PHONE:		EMAIL:			

### ARCHITECT/CONSULTANT

COMPANY/OWNER NAME:			CONTACT:		
ADDRESS:			CITY:		STATE: ZIP:
PHONE:		EMAIL:			

### DOCUMENTS REQUIRED

<input type="checkbox"/> SUBMITTAL EXPRESS	<input type="checkbox"/> CUT SPEC	<input type="checkbox"/> GUIDE SPEC	<input type="checkbox"/> ASSEMBLY LETTER
FOR SUBMITTAL EXPRESS, DO YOU NEED THE FOLLOWING?		DO YOU NEED HARD COPIES (BOOKS)?	
<input type="checkbox"/> DATA SHEETS <input type="checkbox"/> SDS SHEETS <input type="checkbox"/> CONTRACTOR CERTIFICATION LETTER OTHER: _____		<input type="checkbox"/> YES <input type="checkbox"/> NO # OF COPIES? : _____ <input type="checkbox"/> BOUND <input type="checkbox"/> UNBOUND	
		DO YOU NEED SAMPLES?	
		<input type="checkbox"/> YES <input type="checkbox"/> NO # OF SAMPLES: _____	
SEND PACKAGES TO:			CONTACT:
ADDRESS:			CITY: STATE: ZIP:
PHONE:		EMAIL:	

### WARRANTY INFORMATION

WARRANTY TYPE:	<input type="checkbox"/> SINGLE FAMILY	<input type="checkbox"/> MULTI-FAMILY	<input type="checkbox"/> COMMERCIAL
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## ROOF SYSTEM INFORMATION

CONSTRUCTION TYPE: <input type="checkbox"/> NEW <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RECOVER	IF RECOVER, DESCRIBE EXISTING COMPONENTS TO REMAIN:				
DECK TYPE: <span style="float: right;">THICKNESS:</span>					
SHINGLE: <span style="float: right;">COLOR:</span>					
UNDERLAYMENT:					
LEAK BARRIER: <span style="float: right;"><input type="checkbox"/> FULL DECK APPLICATION</span>					
STARTER STRIP:					
HIP AND RIDGE SHINGLE:					
VENTILATION: <span style="float: right;">OTHER:</span>					
ROOFING CEMENT:	OTHER ROOFTOP CAPS/ACCESSORIES:				
METAL FLASHING:	PLUMBING PIPE FLASHING:				
VALLEYS: <input type="checkbox"/> OPEN <input type="checkbox"/> WOVEN <input type="checkbox"/> CLOSED CUT					
LOW SLOPE AREA: <table style="width: 100%; margin-top: 5px;"> <tr> <td><input type="checkbox"/> LIBERTY™ SBS SELF-ADHERING BASE/PLY SHEET</td> <td><input type="checkbox"/> LIBERTY™ PREMIUM ASPHALT PRIMER</td> </tr> <tr> <td><input type="checkbox"/> LIBERTY™ SBS SELF-ADHERING CAP SHEET</td> <td><input type="checkbox"/> LIBERTY™ PREMIUM SBS FLASHING CEMENT</td> </tr> </table>		<input type="checkbox"/> LIBERTY™ SBS SELF-ADHERING BASE/PLY SHEET	<input type="checkbox"/> LIBERTY™ PREMIUM ASPHALT PRIMER	<input type="checkbox"/> LIBERTY™ SBS SELF-ADHERING CAP SHEET	<input type="checkbox"/> LIBERTY™ PREMIUM SBS FLASHING CEMENT
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<input type="checkbox"/> LIBERTY™ SBS SELF-ADHERING CAP SHEET	<input type="checkbox"/> LIBERTY™ PREMIUM SBS FLASHING CEMENT				

## NAIL BASE INSULATION (IF APPLICABLE)

POLYISO THICKNESS:	
SHEATHING: <input type="checkbox"/> PLYWOOD <input type="checkbox"/> OSB	
THICKNESS: _____	THICKNESS: _____ <span style="float: right;">OTHER:</span>
WOOD SPACER: <input type="checkbox"/> 1" <input type="checkbox"/> 1.5" <input type="checkbox"/> 2"	
<span style="float: right;">OTHER:</span>	

## ADDITIONAL NOTES/ COMMENTS