

**TUFFLEX POLYMERS
PRE-JOB WARRANTY REQUEST &
INSTALLED MATERIAL INSPECTION REPORT
FOR WATERPROOFING SYSTEMS**

IT IS REQUIRED THAT SECTION I OF THIS FORM BE SUBMITTED PRIOR TO BIDDING WORK WHERE A TUFFLEX POLYMERS (TUFFLEX) WARRANTY IS REQUIRED. It must be submitted to the TUFFLEX factory and approved by TUFFLEX prior to bidding work. Complete and submit Section II upon project inspection and completion.

**SECTION I
PRE-JOB WARRANTY REQUEST**

Coating System to be used: _____

Thickness of Coatings System to be used: _____

Length of Warranty Requested: _____

Project Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Waterproofing Contractor:

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

General Contractor:

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Architect:

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Building Owner:

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Function of area to be waterproofed: _____

New Construction (circle one): YES or NO

Retrofit Construction (circle one): YES or NO

Area to be waterproofed (Square Feet): _____

ESTIMATED START DATE (month/day/year) _____

Name of TUFFLEX Representative: _____

SUBSTRATE CONDITION

CONCRETE SUBSTRATE

Condition of Concrete Decks (select those that apply):

New Good Fair Poor Old Coatings Spalled Concrete:

Comments: _____

Concrete: (select one)

PSI Structural Structural Lightweight Poured in place Post-tensioned

Vented Metal Pans: Block wall

Are the Concrete Metal Pans Vented? (circle one) YES or NO

Concrete patching performed (circle one): YES or NO

If yes, Compound Used: _____

Sealant Used: _____

PLYWOOD SUBSTRATE

Thickness of Plywood: _____

Tongue & Groove (circle one) YES or NO

Grade of Plywood: _____

Edges will be supported on framing (circle one): YES or NO

Edges will be blocked on Tongue & Groove (circle one): YES or NO

Fasteners, nails or screws to be used: _____

SUBSTRATES WITH PRE-EXISTING COATING SYSTEM

(fill in information about the type of substrate above)

Type of existing system: _____

Manufacturer of existing system: _____

Describe the adhesion of the existing coating to the substrate: _____

Describe adhesion test & results: _____

Modified Bitumen Type: _____

Primer to be used over Modified Bitumen: _____

Width of TUFF-TAPE "PW" seam reinforcing: _____

Thickness of seam reinforcing membrane: _____

SUBSTRATE PREPARATION

Describe process of cleaning prior to commencement of coating system: _____

ARCHITECTURAL SPECIFICATIONS

Attached (circle one): YES or NO Date they will be sent: _____

DATE PRE-JOB WARRANTY REQUEST RECEIVED: _____

DATE APPROVED: _____

APPROVED BY: (print name) _____

TUFFLEX TITLE: _____

SIGNATURE: _____

**SECTION II
COMPLETED PROJECT INSPECTION REPORT**

Date Inspected: _____

Surface Preparation Which Was Performed: _____

Completed System Installed: _____

Coatings Used (Product Name & Gallons):

Primer: _____ **Gallons:** _____

1st Coat: _____ **Gallons:** _____

2nd Coat: _____ **Gallons:** _____

3rd Coat: _____ **Gallons:** _____

4th Coat: _____ **Gallons:** _____

Aggregate (type): _____ Pounds: _____

CONCRETE SUBSTRATE

Proper slope of 1/4" per square foot (circle one): YES or NO

Expansion Joints (type/mfg.): _____

Flashing Reinforcements: _____

Adhesion Tests Proved Satisfactory (circle one): YES or NO

Describe: _____

PLYWOOD SUBSTRATE

Metal Lath on Plywood (amount): _____ Sq.Ft. or (circle) NONE

Proper slope of 1/4" per square foot (circle one): YES or NO

Plywood joints/seams properly reinforced (circle one): YES or NO

Describe reinforcement: _____

Date Application: (month/day/year)

Commenced: _____

Completed: _____

Base Coat adhesion and thickness test cuts taken by the inspector must be:

Attached (circle one) YES or NO

Mailed (circle one) YES or NO. Date mailed: _____

Pictures of the installation must be:

Attached (circle one) YES or NO

Mailed (circle one) YES or NO. Date mailed: _____

System Total Dry Mills Achieved (Exclusive of Aggregate): _____ MILS

Comments: _____

I hereby certify that the above information is correct and that this application was installed in accordance with TUFFLEX POLYMERS' current published instructions and specifications and any additional special TUFFLEX POLYMERS instructions for this project. The above information and certifications may be relied upon by TUFFLEX POLYMERS for issuing a TUFFLEX POLYMERS Material Warranty.

Waterproofing Contractor Signature

Printed Name/Title

Firm Name

I hereby certify that I have inspected this application and have found it to be in accordance with TUFFLEX POLYMERS current published instructions and specifications and any additional special TUFFLEX POLYMERS instructions for this project. The above information and certifications may be relied upon by TUFFLEX POLYMERS for issuing a TUFFLEX POLYMERS Material Warranty.

TUFFLEX Representative or Independent Representative Signature

Printed Name/Title

Firm Name

