



DECKING - FINISHED STRUCTURE APPLICATION FOR WARRANTY

Name of Deck Project: Issue #
Street Address Contact
City State Zip
Deck Owner Phone
Street Address
City State Zip
Applicator Phone
Street Address
City State Zip

Type of Project: New Construction Remedial (No existing Coating) Remedial (Existing Coating)
Project Start Date: Project Completion Date
Type of Warranty: 3 Year 5 Year
Material Material & Labor

Specifications:
Unforeseen Work Done, Not on Original Request. (Complete Details)

Sealer Application Rate
Primer Application Rate
Base Coat Application Rate Total Dry Mils
Intermediate Coat Application Rate Total Dry Mils
Aggregate Type Application Rate
Top Coat Application Rate
Joint Material Amount Used
Resurfacing Material Amount Used

Attach the Following: Photos of Deck and Diagram of Deck plotting out where thickness samples were taken and the mil thickness of each sample.

Project Profile:
Total square Footage SQ/FT of Parking Area SQ/FT of Driving Lanes
Ramp Slope (Inches per Foot) Ramps Square Footage
Use of Deck: Auto Large Truck Forklift Truck Deck Type
Existing Deck Coating Type Total Thickness of Existing Deck System
Number of Levels Any Controlled Environments?
Conditions Requiring Special Consideration

Does Building Owner or Architect need be present for final inspection?

Access to Deck: Is a Fee necessary?
Is security clearance necessary?

Notice of Completion:
Applicators Signature Title Date
Consultant Signature Title Date
Volatile Free, Inc. Approval Title Date