## Duro-Last Roofing, Inc. 525 Morley Drive Saginaw, MI 48601 Ph: 1 (800) 248-0280 Fax: 1 (800) 432-9331

## Pre-Project Approval for Covered Roof Assemblies and Warranties

oor Assemblies and Warranties					
Application Date:					
Warranty/Order No:					
warranty/Order No.					
St: Zip:					
Area:					
Gq. Ftg. to be covered:					
St: Zip:					
Instructions:					
When listing assembly items, such as					
pavers or green roof products, be sure to					
list the exact product name and the weight					
of the product per square foot.					
When listing insulations, provide exact					
product name and density of the product.					
<del>-</del>					
If there are installation guidelines or					
specifications to follow, please include those with this document.					
those with this document.					
Include any details or shop drawings that					
are important to the installation of the					
project.					
**This application must be received no					
less than 10 days prior to the bid date					
for approval of the installation.					
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Applicant/Contra	ctor Information:					
Contractor:						
Customer #:						
Contact:						
Address 1:						
Address 2:						
City:			St:	Zip:		
_						
Project/Building	Information:					
Project Name: _			Area:			
Contact: _	Sq. Ftg. to be covered:					
Address 1: _						
Address 2:						
City:			St:	Zip:		
			7			
			Instruction When listing	ng assembly items, such as		
6.				green roof products, be sure to		
5.			list the exac	ct product name and the weight		
3.			of the produ	uct per square foot.		
2.			When listing	ng insulations, provide exact		
1.				ne and density of the product.		
	Dura Last Mambrana	1 1 1	-	•		
+ + + Duro-Last Membrane + + + If there are installation guidelines or						
7.				specifications to follow, please include those with this document.		
6. 5.			- those war	and decament.		
4.				details or shop drawings that		
3.				ant to the installation of the		
2.			project.			
1.			**This app	lication must be received no		
	////////DECK			10 days prior to the bid date		
<u> </u>	////////// <u>//.5.5.9.</u>	<u> </u>	for approv	al of the installation.		
Deck Type:						
Deak Type.		Engineering A	Approval:			
Membrane Thickness:	□40 mil* □50 mil □60 mil	Appro	val Date:			
System Type:	☐ Mechanically Attached		Quality Assurance			
, ,,	☐ Fully Adhered		Approval:			
	Reliented Approx			val Date:		



The purpose of this form is to indicate that Duro-Last's minimum specifications and installation guidelines are met. Approval of the assembly does not guarantee that the project will meet local building codes or fall within the weight restrictions of the building structure. The contractor is responsible for verifying that all building code and structure requirements have been satisfied.

☐ Ballasted

\*40 mil not approved for vegetative or photovoltaic applications