

ROOFING SYSTEM

DAILY SPRAY FOAM CHECKLIST TECHGUARD ROOFING SYSTEM

Date:				
Job Name/Location:				
Applicator (Company	/ Name):			
Foam Mechanic Filling	ng Out This Forn	m:		
Type Equipment Use	ed to Spray Foar	n:		
Date & Time Since L	ast Precipitation	on Roof Surface:		
PTP SPF System: _		Lot No:	Drum No:	
Version: Slow □	Regula	ır □ Fast □		
Techguard System		Lot No: _	Drum No:	
Type Substrate:				
1. Type Primer Used	d (if necessary):			
2. Is Primer Cured?	(Spot check foa	m adhesion) Ye	s No	
3. Type Vapor Barrie	er Applied (if ned	cessary):		
4. Are all surfaces to	receive foam s	ecure and stable?	Yes No	
5. Chemical Feed Ta	ank or Drum Ter	mperature during S	Spraying:	
R:	degrees	A:	degrees	
6. Input Feed Line P	ressure to Prop	ortioning Pump du	ring spraying:	
R:	psi	A:	psi	
7. Output Pressure f	from Metering Po	ump during Sprayi	ng:	
R:	psi	A:	psi	

8.	Is Purge Air o	n Spray Gun F	ree of Moisture?	(Check wit	h MDP)	Yes	No _		
9.	Is Surface to b	oe Sprayed Fr	ee of Moisture? (C	Check with	MDP ev	ery 20 fl	t.) Yes _	No _	
10.	Ambient Cond	litions:							
Wind Speed:					(Not to exceed 15 mph)				
the	reafter, and at	end of foamin	rature measureme g. If Wet Bulb me OO NOT APPLY F	asurement					or
Time	Dry Bulb	Wet Bulb	Surface Temp	MA	XIMUM W	/ET BULB	READIN	GS FOR (GIVEN
	Temperature*	Temperature	Before Spraying		D	RY BULB	READING	3	
		·				(°F	=)		
				Dry	Wet	Dry	Wet	Dry	Wet
				<u>Bulb</u>	<u>Bulb</u>	Bulb	<u>Bulb</u>	<u>Bulb</u>	<u>Bulb</u>
				50	45.5	67	62.5	84	76
				51	46.5	68	63.5	85	77
				52	47.5	69	64.5	86	77.5
				53	48.5	70	65.5	87	78
				54	49.5	71	66.5	88	78.5
				55	50.5	72	67.5	89	79
				56	51.5	73	68	90	79.5
				57	52.5	74	69	91	80
				58	53.5	75	70	92	80.5
				59	54.5	76	70.5	93	81
				60	55.5	77	71.5	94	81.5
				61	56.5	78	72	95	82
				62	57.5	79	73	96	82
				63	58.5	80	73.5	97	82.5
				64	59.5	81	74.5	98	82.5
				65	60.5	82	75	99	83
				66	61.5	83	75.5	100	83
			egular speed foam						
11.			Full Thickness Thith Previously Spra					P and	
	Brushe	ed if Necessar	y? Yes No	·					
12.	Application Th	ickness of Ea	ch Foam Layer: _						
13.	Have Starting	and Ending S	amples Been Tak	en from Ro	oof? Yes	s I	No		_
	(a) Time o	f Spraying Sta	arting Sample:						
	(b) Time o	f Spraying En	ding Sample:						_

15. Yields:			
Sq. ft. Applied:	_X Thickness	=	bd. ft.
Sq. ft. Applied:	_X Thickness	=	bd. ft.
Total Board Feet of Foam Applie	ed this Date:		bd. ft
Pounds of Chemicals Sprayed t	his Date:		lb
Yield:	bd.ft/lb		
16. Has base coat of Techguard Coatin at a minimum of 10 mils?	g been applied the s	same day as foam	was applied,
Yes No			
Area:sq. ft.			
Coverage:gallon	s/sq. ft X 100 =	g	allons/100 sq. ft
17. Will top coat of Techguard coating b			
Yes No If	No, Why?		

14. Roof map showing area sprayed this date and location of samples taken: