

**DAILY SPRAY FOAM CHECKLIST
ENDURATECH PREMIER ROOFING SYSTEM**

Date: _____

Job Name/Location: _____

Applicator (Company Name): _____

Foam Mechanic Filling Out This Form: _____

Type Equipment Used to Spray Foam: _____

Date & Time Since Last Precipitation on Roof Surface: _____

NCFI SPF System: _____ Lot No: _____ Drum No: _____

Version: Slow Regular Fast

ENDURATECH System _____ Lot No: _____ Drum No: _____

Type Substrate: _____

1. Type Primer Used (if necessary): _____

2. Is Primer Cured? (Spot check foam adhesion) Yes _____ No _____

3. Type Vapor Barrier Applied (if necessary): _____

4. Are all surfaces to receive foam secure and stable? Yes _____ No _____

5. Chemical Feed Tank or Drum Temperature during Spraying:

R: _____ degrees A: _____ degrees

6. Input Feed Line Pressure to Proportioning Pump during spraying:

R: _____ psi A: _____ psi

7. Output Pressure from Metering Pump during Spraying:

R: _____ psi A: _____ psi

8. Is Purge Air on Spray Gun Free of Moisture? (Check with MDP) Yes ____ No ____

9. Is Surface to be Sprayed Free of Moisture? (Check with MDP every 20 ft.) Yes ____ No ____

10. Ambient Conditions:

Wind Speed: _____ (Not to exceed 15 mph)

Take Wet Bulb/Dry Bulb temperature measurements at start of foaming, every two hours thereafter, and at end of foaming. If Wet Bulb measurements exceed the listed maximums for given Dry Bulb measurement, DO NOT APPLY FOAM.

Time	Dry Bulb Temperature*	Wet Bulb Temperature	Surface Temp Before Spraying

MAXIMUM WET BULB READINGS FOR GIVEN DRY BULB READING (°F)

Dry Bulb	Wet Bulb	Dry Bulb	Wet Bulb	Dry Bulb	Wet Bulb
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

* Minimum for Regular speed foam is 70°F, for fast speed foam 50°F.

11. (a) Was Foam Sprayed Full Thickness This Date? Yes ____ No ____

(b) Have All Overlaps with Previously Sprayed Foam Been Checked with MDP and Brushed if Necessary? Yes ____ No ____

12. Application Thickness of Each Foam Layer: _____

13. Have Starting and Ending Samples Been Taken from Roof? Yes ____ No ____

(a) Time of Spraying Starting Sample: _____

(b) Time of Spraying Ending Sample: _____

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

15. Yields:

Sq. ft. Applied: _____ X Thickness _____ = _____ bd. ft.

Sq. ft. Applied: _____ X Thickness _____ = _____ bd. ft.

Total Board Feet of Foam Applied this Date: _____ bd. ft

Pounds of Chemicals Sprayed this Date: _____ lb

Yield: _____ bd.ft/lb

16. Has base coat of ENDURATECH Coating been applied the same day as foam was applied, at a minimum of 10 mils?

Yes ____ No ____

Area: _____ sq. ft.

Coverage: _____ gallons/sq. ft X 100 = _____ gallons/100 sq. ft.

17. Will top coat of ENDURATECH coating be applied to base coated areas within 90 days?

Yes ____ No ____ If No, Why? _____