Signature of Applicant



SPRAY FOAM TECH DATA SHEET

Spray Foam Technical Data

Project Address:			Date of Application:
Builder/Owner Name:			Builder/Owner Address:
INSTALLER	Installation Company:		Date of Work being completed:
	Certified Installer(print):		ID#:
	Phone Number:		Email Address:
APPLICATION	1. Where will the spray foam be applied?		2. Will the spray foam be used as a vapour barrier?
	<u>Location</u>	Thickness (mm)	Yes No No
			3. What thickness is required to obtain a water vapour permeance of 60 ng/Pa*s*m2?
			4. Is the spray foam being applied to the underside of a roof or floor system? Yes ☐ No☐ NOTE: This installation requires design / design review by design professional (Arch / Eng).
			5. If yes, has the professional design (stamped) been submitted? Yes □ No □
PRODUCT INFO	1. Manufacturer:		3. CCMC Listing or Report#:
	2. Colour:		4. Approved as:
	5. Low Density (open cell)		Insulation ☐ Vapour Barrier ☐ Air Barrier ☐
	Medium Density (closed cell) \Box		6. Type 1 ☐ Type 2 ☐
• Buildings cannot be occupied for 24hrs after the installation of spray-applied rigid polyurethane			
•	 It is the contractor's responsibility to ensure a label is placed on the job site as required by CAN/ULC – S705.2 including the above information and stating: "This certificate indicates that the installed sprayapplied rigid polyurethane foam insulation meets the CAN/ULC-S705.1 – medium density – product standard. This product has been installed according to the CAN/ULC-S705.2 installation standard." 		
Standard. This product has been installed according to the CAN/OLC-5705.2 installation standard.			