

# PROJECT REGISTRATION



- |   |   |   |
|---|---|---|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Roofing            | <input type="checkbox"/> Exterior Waterproofing |
| <input type="checkbox"/> Tear-off/Removal | <input type="checkbox"/> Pedestrian Traffic | <input type="checkbox"/> Interior Waterproofing |
| <input type="checkbox"/> Recover          | <input type="checkbox"/> Vehicular Traffic  | <input type="checkbox"/> Protective Coating     |
|   | <input type="checkbox"/> Flashing Only      | <input type="checkbox"/> Traffic Coating        |

Project No.:

Project Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_  
 Specifier: \_\_\_\_\_ G.C.: \_\_\_\_\_

**APPLICATOR TAKE NOTICE: SUBMISSION OF THIS PROJECT REGISTRATION STATEMENT DOES NOT CONSTITUTE APPROVAL OR ACCEPTANCE FOR INSTALLATION OR WARRANTY. TO QUALIFY FOR WARRANTY CONSIDERATION REGISTRATION FORM MUST BE SUBMITTED, REVIEWED AND SIGNED BY THE ALT GLOBAL TECHNICAL DEPARTMENT PRIOR TO START OF ANY WORK.**

## Application Information

Existing W.P.:  None  Asphalt BUR  Coal Tar BUR  Modified Bitumen  
 Single-Ply (Type): \_\_\_\_\_  Coating (Type): \_\_\_\_\_  
 Smooth  Granular  Stone/Ballast

Deck Substrate Type:  Concrete  Wood  Steel  Copper  APP  SBS  
 Asphalt BUR  Coal Tar BUR  Other: \_\_\_\_\_  
 Smooth  Granular  Stone/Ballast  Coating – type: \_\_\_\_\_

Flashing Substrate Type:  Concrete  Brick  Masonry  Wood/CDX \_\_\_\_\_ In.  OSB \_\_\_\_\_ In.  
 Cement Board \_\_\_\_\_ In.  Metal \_\_\_\_\_ Ga. Type: \_\_\_\_\_  
 Modified Bitumen Tie-In  Built-Up Roof Tie-In  Other: \_\_\_\_\_

Primer Type:  None  Primer 222  Primer 276  POX100  Metal  Other: \_\_\_\_\_

Membrane Type:  R230 w  R230 s  R295 Matrix  Flex RR354  Flex RR359  
 RS337 Mortar  Flex RS527  R268 Textured Coating  
 Pre-pigmented  Jobsite pigmented  Membrane Other: \_\_\_\_\_

Reinforcement:  Fleece-P  None  Other: \_\_\_\_\_

Flashing Type:  R230 Thixo  R295 Matrix  R230 w  R230 s  Thixo liquid added

System Type:  Roofing  W.P.  Traffic (reinforced)  Traffic (non-reinforced)  
 Traffic Coating  Protective Coating  Flashing  
 Finish Only  Other: \_\_\_\_\_

Surfacing Type:  None  Finish 288  Finish 288 AS  Finish 220 Clear  
 Aggregate (MD)  Aggregate (HD)  Ceramic Granules  RS291 TF  
 Green Roof  IRMA/PRMA  Planter  Paver  Gravel  
 Tile  Concrete  Asphalt  Wood Decking

Alkalinity Barrier:  R230  R210  Sand: \_\_\_\_\_  
Protection Board:  None  Hardboard  XEPS  Fleece  Other: \_\_\_\_\_

Warranty Type Requested:  5 Year  10 Year  15 Year  20 Year  30 Year Pro-rated (20+10)  
 Material Only  Standard Labor & Materials  Flashing System  
 NDL  Special Warranty Conditions: \_\_\_\_\_

Structural Deck Type:  Concrete \_\_\_\_\_ psi  Lt. Wt. \_\_\_\_\_ In.  Gypsum \_\_\_\_\_ In.  
 Wood \_\_\_\_\_ In.  OSB \_\_\_\_\_ In.  Tectum \_\_\_\_\_ In.  
 Metal \_\_\_\_\_ Ga. Type:  A  F  B Grade:  A  C  E  
 Metal Panel \_\_\_\_\_ Ga. x \_\_\_\_\_ Ga. Purlins @ \_\_\_\_\_ O.C.  
 Other Comments: \_\_\_\_\_

Deck Height: \_\_\_\_\_ Deck Slope: \_\_\_\_\_

**Application Information (Continued)**

**Building Use:** \_\_\_\_\_

**Surface Preparation: (describe)**  
 \_\_\_\_\_  
 \_\_\_\_\_

Area / Floor No.	Location	Comments	Area s.f.
<b>Total Project S.F.:</b>			

**System Design Requirements**

**Wind Design:**       None       FM 1-90       FM \_\_\_\_\_  
 Other: \_\_\_\_\_

**Fire Resist (UL):**       None       Class A       Class B       Class C       Other: \_\_\_\_\_

**Vapor Retarder:**       No       Yes      Type: \_\_\_\_\_

**Thermal Barrier:**       No       Yes      Type: \_\_\_\_\_

**Cover Board:**       No       Yes      Type: \_\_\_\_\_

**New Insulation:**       None       ALT Supplied       By Others  
 Type: \_\_\_\_\_ Thickness: \_\_\_\_\_ R-Value: \_\_\_\_\_  
 Attachment :       Mechanically fastened       Mopped       Cold Adhesive

**New Base Sheet:**       None       28 lb. Felt \_\_\_\_\_ plies       Modified Bitumen       Other: \_\_\_\_\_  
 Attachment:       Nailed       Mopped       Cold Adhesive       Torched

**Comment/Notes:**  
 \_\_\_\_\_  
 \_\_\_\_\_

**Flashing Only Projects**

**Waterproofing/Roofing System Manufacturer: (required for joint warranty projects)**  
 Mfg. Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

**New Waterproofing/Roofing System Construction:**  
 \_\_\_\_\_  
 \_\_\_\_\_

**Building Owner**

**Owner Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

**Owner Contact:**  
 First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Extension: \_\_\_\_\_ Fax: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Email: \_\_\_\_\_ @ \_\_\_\_\_

**Applicator Certification Statement**

I certify this roofing/waterproofing application will be installed by a crew supervised by a company foreman trained and certified by ALT in the current standard guide specifications, details and quality control requirements.

Contractor: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Officer Signature: \_\_\_\_\_ Title: \_\_\_\_\_  
Date: \_\_\_\_\_ Phone: \_\_\_\_-\_\_\_\_-\_\_\_\_ Extension: \_\_\_\_\_

Check here if job start-up assistance and/or applicator training requested. Job start assistance is required for new applicators only. For fully trained and certified applicators job start-up assistance is available at ALT's standard training fee, but not required.

Anticipated start date: \_\_\_\_\_ **Note: Minimum 14 day noticed required for all job start assistance.**

Project Access:

Disclaimer: Review of this project information by ALT Global, LLC (ALT) is solely for the purpose of evaluating eligibility the project for warranty/service agreement acceptance, and does not constitute any representations, endorsements of, or an assumption by ALT of any liability for the adequacy of the design of this building, the sufficiency of the roofing/waterproofing system for the application or suitability for use of any ALT products and/or any materials not supplied by ALT. Corrections or comments made during this review do not relieve the contractor from compliance with requirements of standard guide specifications or other requirements stipulated under contract with the owner. The applicator is responsible for confirming and complying with all local building and/or jurisdictional codes, and correlating all materials, quantities, dimensions, application processes, techniques of installation, and performing all work in a safe and satisfactory manner.

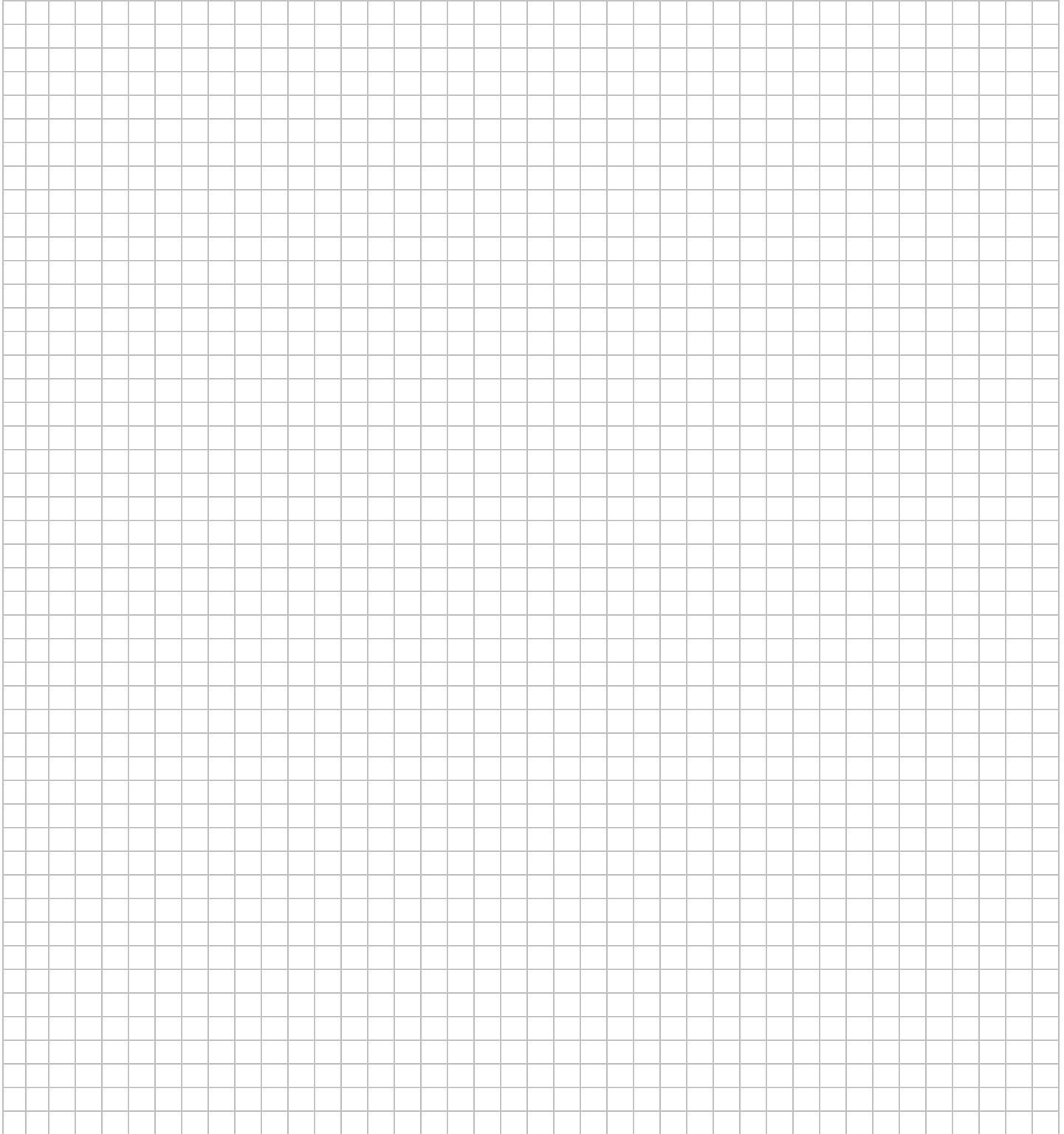
**ALT Global, LLC Technical Department Use Only**

Date Received: \_\_\_\_\_  Approved  Approved With Comments

Approved By: \_\_\_\_\_ Title: \_\_\_\_\_

Date: \_\_\_\_\_

Comments:



List of Standard ALT Details and/or Comments:

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Note: For multiple project areas, attach additional pages as required to the back of form, and list each location and/or floor number separately. If different systems are used in the various locations, submit additional project registration forms for each and attach to top form for separate evaluation and acceptance. Total project square footage should be filled in for ALL areas on all forms. Warranty charges will be based upon the square footage indicated and confirmed by ALT.