

# LOW-SLOPE - INSPECTION REPORT (Page 1)

Job Name \_\_\_\_\_ Inspected by \_\_\_\_\_ Inspection Date \_\_\_\_\_

**SUBSTRATE: (\*\*Please note coating type, on previously coated membrane, in column below.)**

<input type="checkbox"/> BUR/Mod. Bit.	<input type="checkbox"/> Single Ply	<input type="checkbox"/> **BUR/Mod.Bit / Single Ply	<input type="checkbox"/> Foam <input type="checkbox"/> Concrete
<input type="checkbox"/> Asphalt & Gravel	<input type="checkbox"/> PIB	Previously Coated, with what?	<input type="checkbox"/> Previously Coated
<input type="checkbox"/> Smooth Asphalt	<input type="checkbox"/> EPDM	<input type="checkbox"/> Acrylic	If Yes, with what?
<input type="checkbox"/> Tar & Gravel	<input type="checkbox"/> TPA	<input type="checkbox"/> Urethane	<input type="checkbox"/> Acrylic
<input type="checkbox"/> Mineral Surfaced Cap	<input type="checkbox"/> TPO	<input type="checkbox"/> Silicone	<input type="checkbox"/> Urethane
<input type="checkbox"/> Smooth Surfaced Cap	<input type="checkbox"/> PVC	<input type="checkbox"/> Other	<input type="checkbox"/> Silicone
<input type="checkbox"/> Previously Coated**	<input type="checkbox"/> Previously Coated**		<input type="checkbox"/> Other

**INSPECTION DETAILS: (Note to Inspector – Any item needing action must be noted on the Punchlist, Page 2)**

<input type="checkbox"/> Action Required <input type="checkbox"/> No Action Required <p style="text-align: center;"><b>General</b></p> <input type="checkbox"/> debris <input type="checkbox"/> walkways <input type="checkbox"/> substrate / purlins <input type="checkbox"/> contaminants <input type="checkbox"/> leaks <p style="text-align: center;"><b>Drainage</b></p> <input type="checkbox"/> roof drains <input type="checkbox"/> scuppers <input type="checkbox"/> gutters <input type="checkbox"/> downspouts <input type="checkbox"/> ponding – if yes, what % <p style="text-align: center;"><b>Roof Surface</b></p> <input type="checkbox"/> blistering <input type="checkbox"/> splits / cracks <input type="checkbox"/> shrinkage <input type="checkbox"/> fasteners <input type="checkbox"/> open laps / seams <input type="checkbox"/> alligatoring <input type="checkbox"/> punctures <input type="checkbox"/> excessive traffic wear	<input type="checkbox"/> Action Required <input type="checkbox"/> No Action Required <p style="text-align: center;"><b>Flashings</b></p> <input type="checkbox"/> roof-to-wall flashings <input type="checkbox"/> base flashings <input type="checkbox"/> counter flashings <input type="checkbox"/> coping <input type="checkbox"/> ridge caps <input type="checkbox"/> hip caps <input type="checkbox"/> valleys <input type="checkbox"/> expansion joints <p style="text-align: center;"><b>Penetrations</b></p> <input type="checkbox"/> pipes / pitch pans <input type="checkbox"/> A/C units <input type="checkbox"/> vents <input type="checkbox"/> skylights <input type="checkbox"/> access hatch <input type="checkbox"/> ducts <p style="text-align: center;"><b>Aesthetics</b></p> <input type="checkbox"/> finished roof surface neat & clean <input type="checkbox"/> all debris cleaned from roof
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**COATING SYSTEM FINISH: (Note to Inspector – Any item needing action must be noted on the Punchlist, Page 2)**

<p style="text-align: center;"><b>Photos to take with inspection report (as applicable)</b></p> <p>X (Mark photos taken with X)</p> <p>_____ Overall Picture of the roof</p> <p>_____ Areas that need to be corrected</p> <p>_____ Typical Roof Drain Detail</p> <p>_____ Typical Pitch Pan Detail</p> <p>_____ Typical Seam Detail</p> <p>_____ Typical Pipe Penetration Detail</p> <p>_____ Typical Scupper Detail</p> <p>_____ Typical Metal Seam Detail</p> <p>_____ Typical Curb Detail</p> <p>_____ Typical Base Flashing Detail</p> <p>_____ Typical Edge Detail</p> <p>_____ Typical Expansion Joint Detail</p> <p>_____ Typical Termination / Contour Flashing Detail</p> <p>_____ Typical Detail</p> <p>_____ Other _____</p> <p>_____ Other _____</p> <p>Any other details not included that help to capture the overall job</p>	<input type="checkbox"/> Action Required <input type="checkbox"/> No Action Required <p style="text-align: center;"><b>Finish</b></p> <input type="checkbox"/> coating application consistent <input type="checkbox"/> exposed substrate membrane <input type="checkbox"/> worn spots <input type="checkbox"/> adhesion <input type="checkbox"/> cracks <input type="checkbox"/> pinholes <input type="checkbox"/> blisters <input type="checkbox"/> base of all circular penetrations treated <input type="checkbox"/> base of all curb penetrations treated <input type="checkbox"/> endlaps treated <input type="checkbox"/> faulty seams treated <input type="checkbox"/> expansion joints treated <input type="checkbox"/> termination bar secure and caulked <input type="checkbox"/> primer applied (if necessary)
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