



ASSEMBLY LETTER REQUEST FORM

Roofing Systems

717 17th St. Denver, CO 80202 (800) 922-5922

Please complete this form in its entirety and email to your Technical Specialist.

Job Name: _____

Address: _____

City: _____ State / zip: _____

PROJECT INFORMATION (If building is multilevel, complete one form for each roof section.)

Type of Work: NEW CONSTRUCTION COMPLETE TEAR OFF PARTIAL TEAR OFF

Describe roof left in place (if applicable): _____

Roof Height (ft): _____ Roof Size (Squares): _____ Roof Slope (in/ft): _____

Roof Edge Condition: Drip Edge/ Gravel Stop Parapet
Parapet Height (in): _____ Continuous 36" or greater parapets around entire roof.

GUARANTEE

Term (years): 10 15 20 25 30

Riders: (ONLY APPLICABLE IF SPECIFIED AS PART OF THE ROOFING SYSTEM WARRANTY SPECIFICATION FOR PROJECT)

Wind Rider (mph): 80 90 100 110 120 Other _____ N/A

Hail Rider (in): 1" 1.5" 2" Other _____ N/A

Accidental Puncture: 8 Hours 16 Hours 32 N/A

Edge Metal Rider: JM Metal Shop Fabricated per ANSI/SPRI ES-1
(SHOP DRAWINGS MUST BE SUBMITTED TO JM TECHNICAL FOR APPROVAL) N/A

DESIGN CRITERIA

ARE ANY FM RATINGS, UPLIFT PRESSURES, DESIGN WIND SPEED OR UL CLASSIFICATIONS DEFINED IN THE SPECIFICATION FOR PROJECT? IF SO, LIST IN APPROPRIATE SECTION BELOW.

FM rating: _____ FM insured: Yes No

Specified Uplift Pressures (psf): Field _____ Perimeter _____ Corners _____

Specified Design Wind Speed: _____ mph ASCE 7-05 ASCE 7-10

UL Classification: A B C



ASSEMBLY LETTER REQUEST FORM

Roofing Systems

717 17th St. Denver, CO 80202 (800) 922-5922

ROOF ASSEMBLY

Deck type: _____ Gauge/Thickness: _____

Substrate board: _____ Thickness: _____ Securement: _____

Vapor Barrier: _____ # of ply(s): _____ Securement: _____

Fastened Base sheet: _____ Securement: _____

Insulation (layer 1): _____ Thickness: _____ Securement: _____

Insulation (layer 2): _____ Thickness: _____ Securement: _____

Insulation (layer 3): _____ Thickness: _____ Securement: _____

Cover Board: _____ Thickness: _____ Securement: _____

MEMBRANE

Single Ply: EPDM TPO PVC Mil Thickness: _____ Fleece backed: Yes No

Securement: Fully Adhered Mechanically Fastened RhinoBond

Flashings: _____ Securement: _____

SBS / APP / BUR:

Base Ply: _____ Securement: _____

Interply: _____ # of ply(s): _____ Securement: _____

Cap: _____ Securement: _____

Surfacing: _____ Securement: _____

Flashings: _____ Securement: _____

Notes/ Other items not included above:

Submitted by: _____
Print Date

Company name

Phone number Email

Phone: 800-922-5922 option 3

Northeast region: Jamie Fredericks jamie.fredericks@jm.com
Mid-Atlantic region: Debbie Walczyk debbie.walczyk@jm.com
Southeast region: Jim Nunns jim.nunns@jm.com

Mid-West region: Troy Ingle troy.ingle@jm.com
Southwest region: Rick Martelon rick.martelon@jm.com
Pacific region: Larry Tate larry.tate@jm.com