

The following checklist may be used to record deck coating application specifics such as surface preparation, substrates, site conditions, etc. in order to properly access the project specific application and ultimately select the proper deck coating system. *Field testing requirements and procedures are not included here but can be found in Technical Bulletins #184.*

Date: _____ Inspection conducted by: _____

Project name & location: _____

Applicator: _____

Scope of project (est. square footage): _____

Substrate Type: Concrete (NEW) Existing Concrete

Plywood Existing Coating

Application type: Pedestrian Vehicular Both

Coating exposure (direct sunlight, shaded, etc.) _____

Adjacent to OR over occupied space: YES NO

Weather events (precipitation, snow) _____

CONCRETE (NEW) & PLYWOOD

Concrete type & construction (check all that apply):

Structural Compressive Strength, psi: _____

Lightweight Structural Compressive Strength, psi: _____

Elevated Slab On-Grade Slab

Metal Pan, if yes indicate vented or non-vented: Vented Non-Vented

Between Slab Membrane

Concrete cure period, days: _____ Moisture content, % _____

List method used to determine moisture content: _____

Concrete curing compounds: YES NO

If yes, list here: _____

Concrete finish or surface profile per ICRI, CSP 1 – 9: _____ Refer to ICRI CSP illustration on page three

List any sloped areas and grade, if applicable:

Plywood Type: EXT APA B-C EXT APA A-C Other: _____

Plywood thickness: _____



REMEDIAL APPLICATION (EXISTING CONCRETE or COATING)

Existing Concrete Applications:

Concrete type & construction (check all that apply):

Structural Compressive Strength, psi: _____

Lightweight Structural Compressive Strength, psi: _____

Elevated Slab On-Grade Slab

Metal Pan, if yes indicate vented or non-vented: Vented Non-Vented

Between Slab Membrane

Age of concrete: _____ Concrete repairs required: YES NO

List concrete repairs required: _____

Concrete finish or surface profile per ICRI, CSP 1 – 9: _____ *Refer to ICRI CSP illustration on page three*

Concrete Surface Preparation (check all that apply):

Shot Blasting Grinding Abrasive (Sand) Blasting Scarifying

Scabbling Pressure Wash Concrete Repair/Patching

Existing Coating Applications:

Coating type (list manufacturer and chemistry, if available):

Coating condition: _____

Total coating removal required: YES NO *(If NO, then continue to coating repairs)*

Coating repairs required: YES NO

If YES, list specific repairs: _____

List any existing coating surface preparation (pressure wash, power scrub, etc.):

EXPANSION / CONTROL JOINTS (ALL APPLICATIONS)

Lineal footage (est.): _____ Joint dimensions: _____ Joint spacing: _____

List all joint substrates: _____

Existing joint sealant/s: YES NO

If yes, list type & condition: _____

Replace joint sealants: YES NO





NOTES:

