

ROCK-TRED

FLOORING / COATING PROJECT SURVEY

RT Sales Person or Contractor _____ Date _____

Company / Customer _____

Address _____ Phone # _____

City / State / Zip _____ Fax # _____

Name of Contact _____ Email _____

SUBSTRATE CONDITIONS

Name of Area [reference] _____

Size of Area [dimensions / include drawing/sketch if possible] _____

Elevated Slab or Slab-On-Grade [circle one]

Area Usage [warehouse, production, etc.] _____

Type of Substrate [concrete or other] _____

Describe Condition of Substrate [oily, eroded, damp, dry, etc.] _____

Are Floor Repairs Needed ? [spalls, delamination, etc.] [Y] [N]

Describe [photos] : _____

Indicate quantity and/or size repairs _____

Are any cracks visible [Y] [N] Lineal Feet & Width _____

Describe [photos] : _____

Does Substrate have an existing sealer or coating [Y] [N]

Type [if known - Cure-n-seal, epoxy ??] _____

ADDITIONAL REQUIREMENTS

Floor Drains [Y] [N] Number & Size of Drains _____

Pitch to Drain _____

Cove Base [Y] [N] Lineal Feet & Height _____

Curbs [Y] [N] Lineal Feet & Height _____

Verticals [Walls, etc.] [Y] [N] Lineal Feet & Height _____

Joints to be Filled [Y] [N] Lineal Feet & Width _____

Slip-Resistance _____

SURFACE EXPOSURE / USE [during use / operation]

Extreme Heat or Cold / Temperature Range :

Minimum _____ °F Maximum _____ °F

Constant _____ Cycles _____

Chemicals _____
Supply list of various chemicals, % solutions, ambient or elevated temperatures

Frequency of Chemical Exposure :

Constant [Y] [N] Splash & Spill [Y] [N] Occasional [Y] [N]

Traffic [Foot, lift trucks, other] _____

Immersion [by water or other] _____

PROJECT CONDITIONS

Is this for a Shut-Down [Y] [N] Interior Exterior [circle one]

Expected Temperatures During Installation :

Substrate _____ °F Ambient / Air _____ °F

Work Days Available [weekdays, weekends] _____

Work Hours Available : Starting _____ Finish : _____

How soon does customer need use of floor after installation completed ?

Any Other Restrictions on Work Area / Hours _____

Other trades working in area during installation [Y] [N]

Environmental Concerns : Odor [Y] [N]

Dust [Y] [N] Noise [Y] [N] Vibration [Y] [N]

Ease of Access to Area _____

OTHER CONSIDERATIONS

Is there a secure place to store equip./tools between phases ? [Y] [N]

Is there on-site disposal [Y] [N]

Does area have lights ? [Y] [N]

Available electrical power ? 110 V 220 V 440 V Phase _____

Is there access to :

Compressed Air [Y] [N]

WATER [Y] [N]

Bathrooms [Y] [N]

Loading Dock [Y] [N]

Lift Truck [Y] [N]

Any Additional Safety Requirements :

Personnel _____

Equipment _____

ADDITIONAL PROJECT NOTES / COMMENTS : _____
