

THE EMSEAL CHECKLIST

Job Location (City & State)	Name	Company			Date
Installation Location Construction Type Fire Rating Interior Wall Above Grade Below Grade Below Grade Roof New Construction Retrofit Construction Retr	Phone	Fax		Email	
Interior	lob Name		_ Job Locat	tion (City & State)	
Exterior Ficor/Deck Below Grade Submerged Retrofit Construction Fire Rating 1-hr 2-hr 3-hr	INSTALLATION LOC	CATION	CON	ISTRUCTION TYPE	FIRE RATING
Joint Substrate Depth: Varies from:	Exterior Floor/Deck	Below Grade	e Re		☐ No Fire Rating Fire Rating: ☐ 1-hr ☐ 2-hr ☐ 3-h
Have Gap Dimensions Been Field Measured? Yes / No Substrate Surface Temp. Ambient Temp. Substrate Composition: (e.g., concrete, brick, metal, etc.) Membrane Tie-in? Yes / No Type Metal Pour Stops?: Yes / No No Type Metal Pour Stops?: Yes / No Membrane Tie-in? Yes / No Metal Pour Stops?: Yes / No No Type Metal Pour Stops?: Yes / No No Membrane Tie-in? Yes / No No Tierminate? Yes / Secondary Seal Seco		EXPAI	NSION GAP I	NFORMATION	
Substrate Surface Temp. Ambient Temp. (e.g., concrete, brick, metal, etc.) Membrane Tie-in? Yes / No Type Metal Pour Stops?: Yes / No Is dear, etc.) Secondary Seal Secondary Seal Secondary Seal Sound Air Vermin Other Are There Transitions? Yes (explain) / No How Does the Joint Terminate? How Does the Joint Terminate? Secondary Seal Seal Secondary Seal Seal Secondary Seal Secondary Seal Seal			length)	Joint Substrate Depth:	_
Secondary Seal	·			Membrane Tie-in?:□Y	(e.g., concrete, brick, metal, etc.) es / No Type
FOR HORIZONTAL DECK/FLOOR and ROOF JOINTS (ONLY) Sthis a Solid Slab	(e.d. + thermal: + shear etc.)		Secondary Seal Sound Air Vermin Other		
Sthis a Solid Slab Condition? Yes / No Is this a Split Slab Condition? Yes / No Topping slab thickness: Does the Joint have Blockouts? Yes / No No Traffic Types (check all that apply): A will instead of a slab, please denote that "x". If one substrate of your joint is a wall instead of a slab, please denote that "x" as "Wall" instead of giving a dimension. If more than one joint occurs within the same immediate area, please draw them and the appropriate dimensions. Attach additional drawings as needed. Please include any relevant details when submitting checklist to EMSEAL	Are There Transitions? Yes (6	explain) / No	14	How Does the Joint Tel	rminate?
Is this a Solid Slab Condition? Yes /		FOR HORIZONTAL		R and ROOF JOINTS (ON	NLY)
Condition? Yes / No					
have Blockouts? Yes / No Traffic Types (check all that apply): Car Bus Pedestrian None Other Please fill in the slab width dimemsions at each "x" . If one substrate of your joint is a wall instead of a slab, please denote that "x" as "Wall" instead of giving a dimension. If more than one joint occurs within the same immediate area, please draw them and the appropraite dimensions. Attach additional drawings as needed.	Condition? Yes / No Is this a Split Slab Condition? Yes / No				
	have Blockouts? Yes / No Traffic Types (check all that appl) Car Bus Pedestrian Other	y): Please fill a wall inst sion. If mo them and	tead of a slab, ple ore than one join the appropraite	ease denote that "x" as "Wall" in t occurs within the same imme dimensions. Attach additional (nstead of giving a dimen- diate area, please draw drawings as needed.

Please FAX or Email to EMSEAL Fax: (508) 836-0281 / Email: techinfo@emseal.com / Phone: (508) 836-0280

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