



GENERAL INFORMATION

Jobsite Address:					
City:		State:		Zip:	
Date of Installation:					
Building Contractor:					
Insulation Contractor:					
Installed By:					

THERMAL INSULATION & FIRE PROTECTION

AMBI-TITE 201 (245fa) has been installed in the following areas in accordance with AMBIT Polyurethane's Processing Guidelines and meets the code-prescribed insulation levels in effect on the date of installation.

Insulated Area	Aged R-Value	Thickness
Attic Floor ¹	R- []	at [] inches
Underside of Roof Deck	R- []	at [] inches
Attic Walls	R- []	at [] inches
Walls (location): []	R- []	at [] inches
Walls (location): []	R- []	at [] inches
Floors (over unheated crawlspaces, garage, etc.)	R- []	at [] inches
Crawl Space Perimeter	R- []	at [] inches
Basement Walls	R- []	at [] inches
Other (location): []	R- []	at [] inches

¹Nominal thicknesses are representative of field, spray-applied foam material.

AMBI-TITE 201 (245fa) Lot #'s	Ignition Barrier / Intumescent Coating
Lot # []	Manufacturer: [] Lot/Batch#: []
Lot # []	
Lot # []	
	Thermal Barrier Coating
	Manufacturer: [] Lot/Batch#: []

INSTALLER DECLARATION

I hereby certify that I have installed the listed spray foam thermal insulations and fire protection per AMBIT Polyurethanes Installation Instructions and Product Listings, and in a manner compliant with local building codes in effect at the time of installation.

Lead Installer Name (Print):		
Signature:		Date: []