



BUILDING TRUST
CONSTRUIRE LA CONFIANCE



ROOFING NOTICE OF AWARD (NOA)

Engineered, Ballasted, PMR

****ROOF PLANS TO BE SUBMITTED WITH ALL NOAs****

I. PROJECT		
Project Name: Click here to enter text.		
Roof Area 1 Name: Click here to enter text.		
Roof Area 2 Name: Click here to enter text.		
Roof Area 3 Name: Click here to enter text.		
Address: Click here to enter text.		
City: Click here to enter text.	Province: Select	P.C. Click here to enter text.
II. BUILDING OWNER		
Name: Click here to enter text.		
Address: Click here to enter text.		
City: Click here to enter text.	Province: Select	P.C. Click here to enter text.
Contact Person: Click here to enter text.	Tel: Click here to enter text.	Email: Click here to enter text.
III. DESIGNER / SPECIFIER		
Name: Click here to enter text.		
Address: Click here to enter text.		
City: Click here to enter text.	Province: Select	P.C. Click here to enter text.
Contact Person: Click here to enter text.	Tel: Click here to enter text.	Email: Click here to enter text.
IV. GENERAL CONTRACTOR		
Name: Click here to enter text.		
Address: Click here to enter text.		
City: Click here to enter text.	Province: Select	P.C. Click here to enter text.
V. AUTHORIZED ROOFING APPLICATOR		
Name: Click here to enter text.		
Address: Click here to enter text.		
City: Click here to enter text.	Province: Select	P.C. Click here to enter text.
Contact Person: Click here to enter text.	Tel: Click here to enter text.	Email: Click here to enter text.
Project Manager: Click here to enter text.	Tel: Click here to enter text.	Email: Click here to enter text.
VI. OTHER		

2022-06-07

1. Building Usage: Select		2. Recycle Project: Select	
3a. Roof Access: Select		3b. If "Other" specify: Click here to enter text.	
VII. PROJECT INFORMATION			
	Roof Area 1	Roof Area 2	Roof Area 3
1. Anticipated Start Date:	Click here to enter a date.	Click here to enter a date.	Click here to enter a date.
2. Construction Type:	Select	Select	Select
If Tear-Off specify	Select	Select	Select
3. System:	Select	Select	Select
4. Total Sqft. (include flashings):	Click here to enter text.	Click here to enter text.	Click here to enter text.
5. Warranty Type:	Select	Select	Select
6. Warranty Length:	Select	Select	Select
7. Special Warranty Request (Pre-approval required)	Click here to enter text.		
8. Sarnafil Membrane:	Select	Select	Select
i. Gauge:	Select	Select	Select
ii. Colour:	Select	Select	Select
iii. Flashing:	Select	Select	Select
9. Sikaplan Membrane:	Select	Select	Select
i. Gauge:	Select	Select	Select
ii. Colour:	Select	Select	Select
iii. Flashing:	Select	Select	Select
VIII. ENGINEERED ROOF SYSTEM			
1. Membrane Fastener:	Select	Select	Select
2. Sarnabar Spacing:	F: Select P: Select C: Select	F: Select P: Select C: Select	F: Select P: Select C: Select
a. If other please describe	Click here to enter text.	Click here to enter text.	Click here to enter text.
3. Fastener Spacing: Field / Perimeter / Corner	F: Select P: Select C: Select	F: Select P: Select C: Select	F: Select P: Select C: Select
a. If other please describe	Click here to enter text.	Click here to enter text.	Click here to enter text.
IX. BALLASTED ROOF SYSTEM			
1. Ballast:	Select	Select	Select
a. If other please describe	Click here to enter text.	Click here to enter text.	Click here to enter text.
2. Ballast Weight per Sqft Field / Perimeter / Corner	F: Select P: Select C: Select	F: Select P: Select C: Select	F: Select P: Select C: Select
a. If other please describe	Click here to enter text.	Click here to enter text.	Click here to enter text.
3. Separator between Ballast and Membrane	Select	Select	Select
a. If other please describe	Click here to enter text.	Click here to enter text.	Click here to enter text.
4. Paver Pedestal	Select	Select	Select
a. Name of Manufactured Pedestal other please describe	Click here to enter text.	Click here to enter text.	Click here to enter text.
5. Membrane Fastener at Transition:	Select	Select	Select

6. Membrane Securement at Transitions:	Select	Select	Select
X. COVERBOARD LAYER			
1. Type:	Select	Select	Select
2. Size:	Select	Select	Select
3. Attachment:	Select	Select	Select
4. Mechanical Securement – Fastener & Plates:	Fastener: Select Plate: Select	Fastener: Select Plate: Select	Fastener: Select Plate: Select
5. Fastener per 4ft.x8ft. Board: Field / Perimeter / Corner	F: Select P: Select C: Select	F: Select P: Select C: Select	F: Select P: Select C: Select
XI. INSULATION ASSEMBLY			
1. Layer 1 – Flat Board - Type:	Select	Select	Select
a. Size & Thickness:	Size: Select Thickness: Select	Size: Select Thickness: Select	Size: Select Thickness: Select
b. Manufacturer (if not Sika)	Click here to enter text.	Click here to enter text.	Click here to enter text.
2. Layer 2 – Flat Board Type:	Select	Select	Select
a. Size & Thickness:	Size: Select Thickness: Select	Size: Select Thickness: Select	Size: Select Thickness: Select
b. Manufacturer (if not Sika)	Click here to enter text.	Click here to enter text.	Click here to enter text.
3. Layer 3 – Tapered Board - Type:	Select	Select	Select
a. Size & Thickness:	Size: Select Thickness: Select	Size: Select Thickness: Select	Size: Select Thickness: Select
b. Manufacturer (if not Sika)	Click here to enter text.	Click here to enter text.	Click here to enter text.
4. Attachment:	Select	Select	Select
5. Mechanical Securement (all layers)– Fastener & Plates:	Fastener: Select Plate: Select	Fastener: Select Plate: Select	Fastener: Select Plate: Select
6. Fastener per 4ft.x8ft. Board: Field / Perimeter / Corner	F: Select P: Select C: Select	F: Select P: Select C: Select	F: Select P: Select C: Select
XII. VAPOUR RETARDER			
1. Type:	Select	Select	Select
2. Primer (if applicable):	Select	Select	Select
3. Manufacturer (if not Sika)	Click here to enter text.	Click here to enter text.	Click here to enter text.
XIII. THERMAL BARRIER			
1. Type & Attachment:	Type: Select Attachment: Select	Type: Select Attachment: Select	Type: Select Attachment: Select
2. Mechanical Securement – Fastener & Plates:	Fastener: Select Plate: Select	Fastener: Select Plate: Select	Fastener: Select Plate: Select
3. Fastener per 4ft. x 8ft. Board: Field / Perimeter / Corner	F: Select P: Select C: Select	F: Select P: Select C: Select	F: Select P: Select C: Select
XIV. PMR (INVERTED) SYSTEM			
a. Over Burden Layer			
1. Type:	Select	Select	Select

a. If other please describe	Click here to enter text.	Click here to enter text.	Click here to enter text.
b. Weight per sqft. Field / Perimeter / Corner	F: Select P: Select C: Select	F: Select P: Select C: Select	F: Select P: Select C: Select
b. Drainage Layer or Filter Fabric			
1. Type:	Select	Select	Select
a. If other please describe	Click here to enter text.	Click here to enter text.	Click here to enter text.
2. Manufacturer (if not Sika)	Click here to enter text.	Click here to enter text.	Click here to enter text.
c. Insulation Layer			
1. Type:	Select	Select	Select
a. If other please describe	Click here to enter text.	Click here to enter text.	Click here to enter text.
2. Size & Thickness:	Size: Select Thickness: Select	Size: Select Thickness: Select	Size: Select Thickness: Select
3. Manufacturer (if not Sika)	Click here to enter text.	Click here to enter text.	Click here to enter text.
d. Filter Fabric			
1. Type:	Select	Select	Select
a. If other please describe	Click here to enter text.	Click here to enter text.	Click here to enter text.
2. Manufacturer (if not Sika)	Click here to enter text.	Click here to enter text.	Click here to enter text.
e. Membrane Layer (provided in VII PROJECT INFORMATION SECTION)			
f. Thermal Barrier / Levelling Layer			
1. Type:	Select	Select	Select
2. If other please describe	Click here to enter text.	Click here to enter text.	Click here to enter text.
XV. EXISTING ROOF ASSEMBLY (select, only for those materials to remain)			
1. Membrane:	Select	Select	Select
2. Membrane Attachment:	Select	Select	Select
3. Insulation:	Select	Select	Select
4. Insulation Attachment:	Select	Select	Select
5. Vapour Retarder:	Select	Select	Select
6. Vapour Retarder Attachment:	Select	Select	Select
XVI. DECK INFORMATION			
1. Type:	Select	Select	Select
2. Thickness:	Select	Select	Select
3. Pull Test Performed:	Select	Select	Select
4. Pull Test Value:	Click here to enter text.	Click here to enter text.	Click here to enter text.
XVII. ROOF ATTRIBUTES			
1. Roof Dimension: Length (ft.)	Click here to enter text.	Click here to enter text.	Click here to enter text.
2. Roof Dimensions: Width (ft.)	Click here to enter text.	Click here to enter text.	Click here to enter text.
3. Roof Dimensions: Height (ft.)	Click here to enter text.	Click here to enter text.	Click here to enter text.
4. Roof Type:	Select	Select	Select
5. Roof Slope:	Select	Select	Select
XVIII. BUILDING ATTRIBUTES			
1. Overall Building	Length (ft.): Click here to enter text.	Width (ft.): Click here to enter text.	
2. Overhang/Canopy:	Length (ft.):	Width (ft.):	Height (ft.):



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	Click here to enter text.		Click here to enter text.		Click here to enter text.	
3. Building Exposure:	Select	4. Building Importance:	Select	5. Building Opening:	Select	
6. Pressurized Building:	Select	7. Other	Click here to enter text.			
XIX. CODE INFORMATION						
1. External Fire:	Select	2. Other Fire:	Click here to enter text.		3. Wind Load Compliance:	Select
4. Wind Load Pressure CSA:	Field (psf): Click here to enter text.		Perimeter (psf): Click here to enter text.		Corner (psf): Click here to enter text.	
5. FM Wind Load Rating:	Select	4. Perimeter/Corner Zone value "z" (ft.): Click here to enter text.				
XX. OTHER INFORMATION						
Click here to enter text.						

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