

## Final Job Installation Report – Interior Applications for ACTECH Vapor Epoxy Slurry (VES™)

Complete ALL ENTRIES While You Are Actually Prepping & Installing This Project.

**This Form Must Be Submitted Within 30 Days of Project Completion  
to be Eligible for ACTECH’s Labor + Material Performance Warranty.**

**Purpose:**

- 1- To complete the registration of this project for eligibility for ACTECH’s Performance Warranty.
- 2- To build the CONTRACTOR’s Own File documenting the proper installation of this project.
- 3- To increase Quality Control / Quality Assurance during project execution.

**Why?** This Final Job Installation Report should help you cover all the bases during installation. Use this form to document and keep project records – in order to ensure installation success -- and to avoid liability.

If you encounter any problems during surface prep or ACTECH Primer installation ... **STOP ... And contact ACTECH Technical Staff immediately.**

**Where to Send?** Mac Krauss – [mkrauss@actechperforms.com](mailto:mkrauss@actechperforms.com) Alex Rogers – [arogers@actechperforms.com](mailto:arogers@actechperforms.com)

This Final Job Installation Report **MUST** be Received by ACTECH Within 30 Days of Project Completion on any Project seeking ACTECH’s Labor + Material Performance Warranty.

### ACTECH Approved On-Site Supervisor(s) Named Below:

**Below is the same Information as in Pre-Job. No need to fill this section out if you submitted a Pre-Job and this information has not changed.**

Name of On-Site Supervisor: \_\_\_\_\_

I will be the on-site supervisor for **(select one)**

- Both surface preparation AND the ACTECH VES™ application on this project.
- Only the concrete surface preparation on this project.
- Only the ACTECH VES™ application on this project.

**IMPORTANT:** If not doing both surface prep and application of ACTECH VES™, we will need an Onsite-Supervisor Form, Pre-Job Survey, and Final Job Installation Report filled out by both parties.

The Surface Prep Onsite Supervisor will only need to fill out the following sections on the Final Job Installation Report:

1. Project Information (fill out the project name, address, size and date)
2. Surface Prep
3. Patching/Cracks and Joints Filling/ Topping Material **(If Surface Prep Contractor doing this)**

**Project Information**

**Project Name (Required):** \_\_\_\_\_

**No need to fill out this section if you already submitted a Pre-Job Form and this information has not changed.**

Size of Project (Square Feet): \_\_\_\_\_

Project Address: \_\_\_\_\_

Start Date: \_\_\_\_\_

Products to Be Installed on Top of ACTECH Primer: \_\_\_\_\_

**Mock-Up / Test Patch**

**No need to fill out this section if you already submitted a Pre-Job Form and this information has not changed.**

Did you previously install a Mock-Up / Test Patch for this project?  Yes  No

Was the Mock-Up / Test Patch Approved as being suitable for this concrete slab and having achieved all required performance criteria?  Yes  No

\_\_\_\_\_

**Storage**

Are ALL products (including ACTECH VES™) ready for application having been climatized and stored at proper temperature?

Yes  No    If No, explain \_\_\_\_\_

**Surface Prep**

We are using  Shot blaster  Grinder  Other: \_\_\_\_\_ for Mechanical Surface Profiling.

We are achieving  CSP 3  CSP 4  CSP 5  Other: \_\_\_\_\_ (Minimum CSP 3 required)

We are removing a previously applied product and/or patching material which requires a more aggressive preparation method?  Yes  No

If Yes, Explain \_\_\_\_\_

\_\_\_\_\_

We are managing to achieve a consistent & uniform mechanical profile on this deck  Yes  No  
(NOTE: If you are getting high ridges and valleys in the CSP Profile, this will increase material consumption)

Are you seeing any evidence of surface contamination or stains after surface profiling?  Yes  No Describe: \_\_\_\_\_

If Yes, what steps are you taking to address the issue after discussing with ACTECH Technical Team? \_\_\_\_\_

Record your Water Drop Test readings (in accordance to ASTM F3191) to Confirm Porosity/Absorbency of the profiled substrate. **(Water drop from a “straw” must absorb into the mechanically profiled substrate within a Maximum of 60 seconds).**

**Did ALL Water Drop Tests Absorb Within 60 Seconds?**  Yes  No  
**If Not, Do Not Proceed. ... STOP ... And contact ACTECH Technical Staff immediately.**

Test #	# of Seconds		Test #	# of Seconds
1			7	
2			8	
3			9	
4			10	
5			11	
6			12	

👉 **\*\*\* IMPORTANT \*\*\*** BEST Practice: Take Photos / Videos documenting Water-Drop Test /Timer Results and Locate Test Areas on Your Project Map/Sketch.

Does Concrete contain any reinforcing fibers?  Yes  No  
If Yes, are you burning off the fibers AFTER Profiling?  Yes  No

**CRACKS**

**TECH TIP:** When using a crack/ or patching filler other than ACTECH VES™, we recommend using a cementitious filler/patching (such as Rapid Set Cement All) before coating with ACTECH VES™. For smaller cracks, just flood with ACTECH VES™. For other crack fillers and patching products we recommend a mock up to ensure compatibility. **DO NOT INSTALL POLYMER BASED PRODUCTS BEFORE INSTALLING ACTECH PRIMERS.**

Are you seeing excessive surface cracking or large structural cracks after surface profiling?  Yes  No

If Yes, are you consulting with the ACTECH Technical Department about proper crack treatment before proceeding?  
 Yes  No

Are you chasing Cracks with a saw and thoroughly cleaning them of all debris?  Yes  No

We are installing (name(s) of crack filler products) \_\_\_\_\_

The Crack Filler Products are being installed  Over  Under the ACTECH VES™.  
(NOTE: WHEN INSTALLING UNDER ACTECH VES™, ONLY USE PORTLAND CEMENT BASED PRODUCTS)

**TECH TIP: We recommend Rapid Set Cement All for larger crack filling and patching, ensuring to install under the ACTECH VES™. For smaller cracks, just flood with ACTECH VES™.**

**CONTROL JOINTS**

We are cleaning and prepping all Control Joints.  Yes  No  
We are using ACTECH VES™ to Fill Joints.  Yes  No  
If No, What Filling Material are you using?: \_\_\_\_\_

**EXPANSION JOINTS**

We are honoring all Expansion Joints Through Final Coating  Yes  No  
We are making sure the side walls of the Expansion Joint are coated with ACTECH VES™(A+B only / No Part C Filler)  
 Yes  No

**PATCHING of DAMAGED AREAS**

Patching is being installed  Over  Under ACTECH VES™? (WHEN UNDER, ONLY USE PORTLAND CEMENT BASED PRODUCTS)  
Names of Patching Products Installed: \_\_\_\_\_

**NOTE: ACTECH cannot warranty cracks especially potential moving cracks**

**Installing of ACTECH VES™**

Application Date: \_\_\_\_\_ Application Time: \_\_\_\_\_

Was the interior space Climatized?  Yes  No

HVAC Operational?  Yes  No

**NOTE: If internal climate is not stable please contact ACTECH**

At Time of Application, the Temperature is  Steady and/or Falling  
**NOTE: ACTECH VES™ must ONLY be applied when temperatures are steady and/or falling -- NOT rising.**

At Time of Application, is Ambient Temp within 40-90°F?  Yes  No  
At Time of Application, Substrate Temperature is within 40-90°F.  Yes  No

During Application, we are continuously monitoring conditions to make sure the **Dew Point Stays MORE THAN 5°F ABOVE the Current Ambient Temperature**  Yes  No

The devices we are using to monitor Temperatures, Environmental Conditions, and Dew Points are \_\_\_\_\_

Because of unsuitable Environmental Conditions, we are protecting the application area.  Yes  No  N/A

Explain: (tenting, heating, etc) \_\_\_\_\_

**Log of ambient and slab temps during application and cure time**

(If application is being spread over multiple days, please duplicate this Log page and enter data for each application. Submit all logs as part of this Final Installation Form).

AREA 1	Date/Time	Ambient Air Temperature	Relative Humidity	Dew Point Temperature	Slab Temperature
Application Start					
Application End					
Curing					
Curing					
Curing					
Curing					

**Application:**

We have reviewed all Mixing Instructions and have set up a good mixing station.  Yes  No

We are using a timer to make sure we mix each kit/unit properly.  Yes  No

We are mixing A and B for 1-timed minute in separate mixing bucket.  Yes  No


We are then, gradually pouring Bag C of the ACTECH VES™ Filler in and mixing for 2 additional minutes.  Yes  No

We are using the Proper  1/4" x 1/4" V-notched trowel/rake with extension pole  
 Other \_\_\_\_\_

We are using the Proper  Spiked roller to reduce bubbles, remove rake marks and facilitate self-leveling  Yes  No

Our Recording of the material used is as follows:

Application Area \_\_\_\_\_ SF                      ACTECH VES™ \_\_\_\_\_ gals

 **TECH TIP: TAKE Photos of ACTECH VES™ --- (and of your TEAM to post on social media)**

**Watch For Danger Signs During Primer Application**

While we are applying the ACTECH VES™, we are making sure the material is spreading smoothly and appears “glossy” -- with no protrusions, fibers, or debris visible on the surface.    Yes  No

While applying the ACTECH VES™, we are keeping an eye out for any pin-holes, fisheyes, condensation, amine blush, or bubbles beginning to form.    Yes  No

**If ANY problems are spotted, DO NOT PROCEED. ... STOP ... And contact ACTECH Technical Staff immediately.**

**Post-Cure Inspection of ACTECH VES™**

Inspection Date: \_\_\_\_\_                      Inspection Time: \_\_\_\_\_

Is the surface tack-free after about 4 hours?    Yes  No

Were additional hours required for flash-off and curing “tack free”?    Yes  No

Is there ANYTHING about the curing/appearance of the ACTECH VES™ that has you concerned?    Yes  No

**If YES, Do Not Proceed. ... STOP ... And contact ACTECH Technical Staff immediately.**

Was the ACTECH VES™ exposed to excess dewpoint, high humidity, or precipitation (before it cured) that could adversely affect the coating?    Yes  No

If Yes, What remedy is being used (after consulting with ACTECH)?

\_\_\_\_\_

Did a careful visual inspection of the cured ACTECH VES™ reveal any physical protrusions / high spots that were not completely covered?    Yes  No

If Yes, What remedy is being used (after consulting with ACTECH)? \_\_\_\_\_

Did a “Touch Test” of the cured ACTECH VES™ reveal any “Greasy” amine blush formation?  Yes  No

If Yes, what remedy is being used (after consulting with ACTECH)? \_\_\_\_\_

After close inspection, are there any Pinholes?  Yes  No

If Yes, what remedy is being used (after consulting with ACTECH)? \_\_\_\_\_

After close inspection, are there any Fisheyes?  Yes  No

If Yes, what remedy is being used (after consulting with ACTECH)? \_\_\_\_\_

After close inspection, are there any Bubbles appearing in the coating?  Yes  No

If Yes, what remedy is being used (after consulting with ACTECH)? \_\_\_\_\_

Any Other Defects Observed ?  Yes  No

If Yes, what remedy is being Used (after consulting with ACTECH)? \_\_\_\_\_

**Post-Installation Check List**

**NOTE:** It is a Best Practice for the contractor installing the primer coat(s) to properly hand-off the project to the contractor installing the Contractor/Installer of the next layer in the roofing/waterproofing assembly.

**HAND OFF:**

We have informed the Contractor/Installer of the next layer in the roofing/waterproofing assemble that they are responsible for ensuring that;

- 1- the product being installed on top of the ACTECH VES™ is compatible and has been tested.
- 2- the recoat window between ACTECH VES™ and the subsequent product will be honored, and
- 3- that the surface of the ACTECH VES™ must be made clean and ready to bond with the subsequent product.

Yes  No      Name & Contact Info: \_\_\_\_\_

**PROTECTION:**

We have informed the GC/Owner to make arrangements to protect the area until the ACTECH VES™ is fully cured.

Yes  No      Describe: \_\_\_\_\_

**Submittal**

As the Approved On-Site Supervisor(s) for this Project, I confirm that I have received, reviewed, and understand all the ACTECH documents required for 1) concrete surface preparation, 2) product installation and 3) the project's eligibility for ACTECH's Performance Warranty. All information provided above is accurate and true to the best of my knowledge. I understand that any information discovered to be falsified or purposely misrepresented at any time may result in the cancellation or voiding of any warranty offered or issued by ACTECH for any of its products involved in this project.

Signature of Approved On-Site Supervisor: (E-Signature Acceptable)

Date: \_\_\_\_\_

**FOR ACTECH INTERNAL USE ONLY**

Date Received By ACTECH \_\_\_\_\_ NAME: \_\_\_\_\_

Signature of ACTECH Reviewer: \_\_\_\_\_

Date Sent Back to On-Site Supervisor: \_\_\_\_\_

