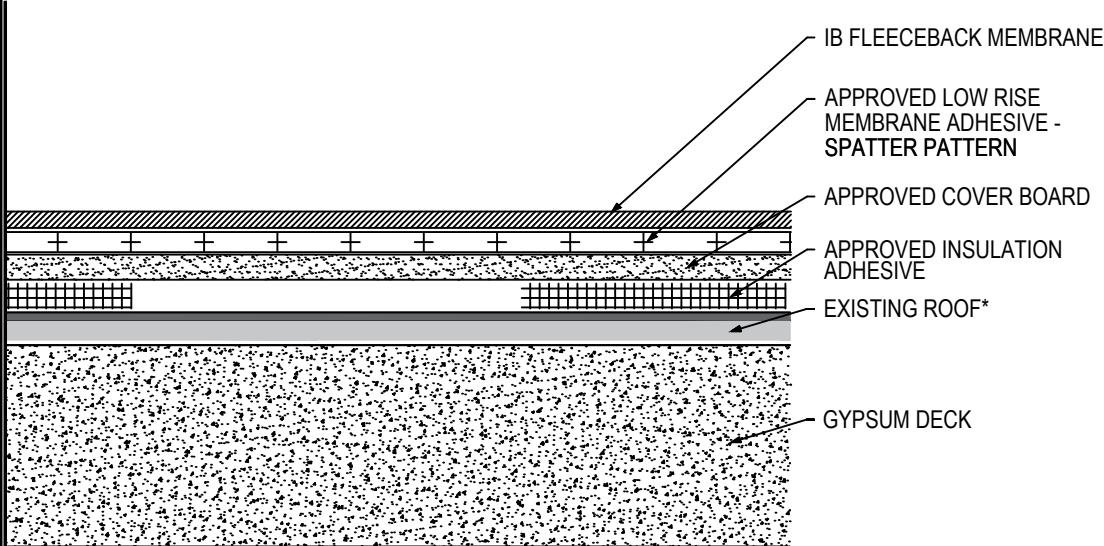


**Fully Adhered Membrane (SP) - Cover Board (RB) - Existing Roof - Gypsum Deck (Recover)**


Fire Rating / Max. Slope	Deck Type	Cover Board (over Existing Asphaltic Roof)			IB Fleeceback Membrane Attachment	Max. Design Pressure**
		Type	Insulation Adhesive	Pattern		
<input type="checkbox"/> 1 <sup>st</sup> Class "A" 1":12"	Poured Gypsum	Approved Cover Board	BM, CR20, OB500, OSFA, PG1, OR RSIA	Four continuous ribbons, 12" o.c.	CR-20 Spatter Pattern 3.75 lbs/square	Minimum Req for IB Warranty
<input type="checkbox"/> 1 <sup>st</sup> Class "A" 1":12"	Poured Gypsum	1/4" DensDeck Prime or 1/4" Securock Gypsum Fiber Board	OB500	Four continuous ribbons, 12" o.c.	CR-20 Spatter Pattern 3.75 lbs/square	-120.0 psf (Class 240)
<input type="checkbox"/> 1 <sup>st</sup> Class "A" 1":12"	Poured Gypsum	1/4" DensDeck Prime or 1/4" Securock Gypsum Fiber Board	OSFA, PG1, or RSIA	Four continuous ribbons, 12" o.c.	CR-20 Spatter Pattern 3.75 lbs/square	-232.5 psf (Class 465)
<input type="checkbox"/> 1 <sup>st</sup> Class "A" 1":12"	Poured Gypsum	1/4" DensDeck Prime	CR20	Four continuous ribbons, 12" o.c.	CR-20 Spatter Pattern 3.75 lbs/square	-262.5 psf (Class 525)
<input type="checkbox"/> 1 <sup>st</sup> Class "A" 1":12"	Poured Gypsum	1/4" Securock Gypsum Fiber Board	CR20	Four continuous ribbons, 12" o.c.	CR-20 Spatter Pattern 3.75 lbs/square	-267.5 psf (Class 535)

**Existing Roof:** APP or SBS modified bitumen, smooth or granule surfaced asphaltic built-up roof only.

**Approved Cover Board:** DensDeck Prime, Securock Gypsum Fiber Board, minimum 1/4" thickness; or minimum 1/2" IB HD ISO; or minimum 1/2" thick Structodek HD Primed

**Approved Insulation Adhesive:** BM = Polyset BoardMax, CR-20 = Polyset CR-20, OB500 = OlyBond 500 Adhesive Fastener, OSFA = Millennium One-Step Foamable Adhesive; PG-1 = Millennium PG-1 Pump Grade Adhesive; or RSIA = IB Rapid Set Insulation Adhesive; maximum bead spacing 12" o.c. unless otherwise indicated.

**Fire Classification Note(s):** 1UL Class A up to 1":12" limited to any Class A, B or C built up roof system, covered with any of the following gypsum cover boards: minimum 1/4" DensDeck Prime, Securock Ultralight Coated Glass-Mat, or DexCell FA Glass Mat Roof Board, or minimum 7/16" DexCell Cement Board. \*Maintains existing Classification for any Class A, B or C, coated or uncoated, insulated, or un-insulated, smooth surfaced, Type G3 mineral surfaced cap sheet or mineral surfaced modified bitumen membrane BUR system when utilized with minimum 1/4" Securock Gypsum Fiber Board. \*The use of other IB Approved Cover Boards may not retain UL Classification. \*Recover over modified bitumen or single-ply roof may not retain fire classification.

\*\* Refer to Substrate Resistance table for required pull-out values.

For additional information about IB Roof Systems requirements, recommendations, installation details, approvals and limitations for the above assemblies, please refer to the latest edition of the IB Roof Systems Specifications Manual. For Technical Services please contact us at 800-426-1626.

Membranes:	Membrane Color:	Warranty Length***	Warranty Type***
<input type="checkbox"/> IB PVC Single-Ply FB 50 Mil	<input type="checkbox"/> White*	<input type="checkbox"/> 10 Year <input type="checkbox"/> 15 Year <input type="checkbox"/> 20 Year	<input type="checkbox"/> Total System - No Dollar Limit (NDL)
<input type="checkbox"/> IB PVC Single-Ply FB 60 Mil	<input type="checkbox"/> White*	<input type="checkbox"/> 15 Year <input type="checkbox"/> 20 Year <input type="checkbox"/> 25 Year	<input type="checkbox"/> Warranty Plus (WP)
<input type="checkbox"/> IB PVC Single-Ply FB 80 Mil	<input type="checkbox"/> White*	<input type="checkbox"/> 15 Year <input type="checkbox"/> 20 Year <input type="checkbox"/> 25 Year	<input type="checkbox"/> Commercial Limited Material Warranty (CLMW)
			<input type="checkbox"/> Residential Limited Material Warranty (RLMW)

\* Meets CRRC, Title-24, & EnergyStar Standards

\*\*\* Refer to Warranty Selection Guide for Warranty Riders, Term Length Limitations, and eligibility requirements of the Warranty Program

**Submitted By:**  
**Address:**  
**Email:**

**Project Name:**  
**Address:**