



SPECIAL INSPECTOR REPORT

For Lightweight Insulating Concrete (LWIC), per FBC 1917

Rev. 03-02-2017

ROOFING PERMIT NUMBER: _____

PROPERTY ADDRESS: _____

LWIC installed over an existing deck (during reroofing) LWIC installed during new construction

Date(s) of installation of LWIC _____ Date(s) of installation of LWIC _____

Date(s) of installation of LWIC _____ Date(s) of installation of LWIC _____

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LWIC Product Approval (NOA) No. _____ LWIC Manufacturer _____

LWIC Installer (approved by manufacturer) _____

LWIC Installer license number _____

Type of LWIC installed:

- Aggregate LWIC
- Cellular LWIC with mechanically attached roof system
- Cellular LWIC with adhered roof system (deck surface prepared per LWIC and Roof System NOA)

Substrate the LWIC is installed over:

- Slotted steel deck Existing steel deck Structural concrete Twin tee concrete
- Existing roof assembly Other deck type _____

Steel deck support spacing _____

Deck attachment method (per the LWIC Product Approval NOA):

Puddle weld size _____ Washers: Yes No Weld spacing _____" o. c.

Screw type _____ Screw spacing _____" o. c.

Side lap attachment _____

Bonding agent (per the LWIC Product Approval NOA) N/A

Bonding agent type and coverage _____

Venting the LWIC N/A Method of venting _____

(Required when the LWIC is installed over non-venting substrates)

Polystyrene Insulation (Holey Board)

Installed per LWIC Product Approval NOA? Yes No N/A

Installed per approved building plans? Yes No N/A

Lightweight Insulating Concrete (LWIC)
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ROOFING PERMIT NUMBER: _____

PROPERTY ADDRESS: _____

LWIC Admixtures (per LWIC Product Approval NOA) Yes No N/A

Admixture Type _____

LWIC Curing Compound (per LWIC Product Approval NOA) Yes No N/A

Curing Compound Type _____

Minimum thickness of LWIC _____ **Minimum slope of LWIC** _____

Expansion joints _____

Installed per approved building plans? Yes No N/A

LWIC cast density recording (checked hourly)

(Acceptable ranges per LWIC Product Approval NOA) Yes No

Dry Density Range: _____ Pcf (depending on roof cover type)

Wet Density Range: _____ Pcf (depending on roof cover type)

28-day Compressive Strength Range _____ (depending on roof cover type)

Walkability Inspection

Approved Disapproved Dade of Inspection _____

LWIC fastener pull test report

(Required minimum pull-out resistance of 40 pounds for new pours) Yes No

All of the LWIC was installed was in compliance with the requirements of the Florida Building Code Section 1917, the Product Approval NOA, and the LWIC manufacturer's recommendations and specifications.

From my observations of the mixing, installation and finishing of the LWIV system, to the best of my knowledge, belief and professional judgment those portions of the project outlined above meet the intent of the Florida Building Code and are in substantial accordance with the approved permit documents.

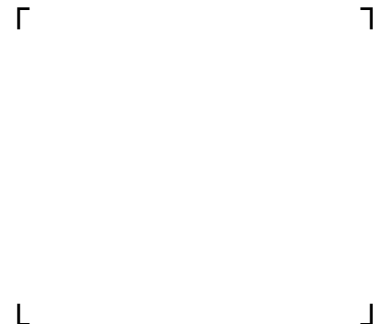
Architect/ Engineer

Name & FL License No. _____

Firm: _____

Address: _____

Telephone: _____



Seal/Signature/Date