

EFIS/ Stucco Certification Form "A"

Stucco System Contractor Company Name and Address:

Completion Date: _____ Job Address: _____

Building Permit Number: _____

The Exterior Insulation and Finish system (EIFS) or Stucco System installed on the structure located at the address indicated above:

_____ **CONFORMS** (To EIFS or Stucco system manufacturers recommended installation practices, the appropriate Sections of the Building Code enforced by this jurisdiction, and all such practices outlined in the listed Evaluation Reports for the system used.)

Product Component Names:

Adhesive(s) _____

Fasteners (mech.) _____

Base Coat _____

Reinforcing Fabric/Material(s) _____

Finish Coat(s) _____

Installation

Conforms

Substrate Type & Tolerance

Fasteners

Insulation

Drainage Plain

Reinforcing Fabric

Base Coat

Finish

The information entered above is offered in testimony that the Stucco or EIFS installation conforms with the manufacturer's installation methods and procedures as well as the manufacturer's listed Evaluation Report(s).

NOTE: An installation report shall be received from the **Sealant Installer** indicating that the sealant installation conforms to the system specific evaluation report and the sealant manufacturer's installation methods and procedures must accompany this declaration. (See **Larimer County Stucco system verification form "B".**)

Signature of Contractor/Installer and Company Title:

Telephone Number: _____