

Third Party Inspection Guidelines For Inspectors As Part of the dryvitCARE™ EIFS Repair/Restoration

DS497



SECTION ONE

A. Objective

The objective of this guide is to provide owners and general contractors/construction managers with guidelines for third party inspections that are required as part of the DryvitCARE Exterior Insulation and Finish Systems (EIFS) Repair/Restoration process in order to qualify for a system warranty upon completion. Independent third party inspectors are engaged by owners or general contractors/construction managers and are not agents of Dryvit Systems, Inc. These guidelines are intended to inform owners, general contractors/construction managers and independent third party inspectors about DryvitCARE EIFS Repair/Restoration Program and to aid in the inspection process and may be used as a basis for issuance of a Dryvit warranty. These guidelines were prepared by Dryvit in good faith and should not be interpreted as creating any responsibility, warranty, guarantee or liability for Dryvit with respect to the use, design, installation or third party inspection of any specific project. Although sections of these guidelines deal with flashing, windows, doors and other building envelope components, they should not be considered components of the Dryvit EIFS, and Dryvit, by issuing these guidelines shall not have any responsibility or liability for, nor makes any warranty or guarantee with respect to these materials or their installation. Dryvit EIF Systems covered by the guidelines include:

| System | Specification | Application Instructions | Installation Details | Product Data Sheet |
|-----------------------------------|---------------|--------------------------|----------------------|--------------------|
| Outsulation® | DS118 | DS204 | DS107 | DS447 |
| Outsulation® Plus MD System® | DS137 | DS218 | DS110 | DS445 |
| Outsulation MD System® | DS168 | DS169 | DS167 | DS443 |
| Infinity® | DS136 | DS145 | DS120 | DS224 |
| Outsulation® LCMD Systems 1-5 | DS171 | DS172 | DS170 | N/A |
| Outsulation® X System | DS835 | DS836 | DS837 | |
| DryvitCARE EIFS Repair Procedures | | DS498 | | |

B. Contractor Qualifications

1. The contractor shall:
 - a. be knowledgeable of the construction industry and practices.
 - b. be knowledgeable in the installation of EIFS, sealants, and architectural coatings.
 - c. have attended a DryvitCARE session provided by Dryvit.

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Third Party Inspection Guidelines for CARE Inspectors



C. Inspector Qualifications

1. The inspector shall:
 - a. be knowledgeable of construction industry and practices.
 - b. be knowledgeable in the installation of EIFS, sealants, architectural coatings and other wall envelope components.
 - c. have attended a dryvitCARE session provided by Dryvit.
 - d. be employed by a firm which is regularly involved in building envelope evaluations and knowledgeable of building envelope forensic evaluation processes and protocols.

D. Initial Evaluation

1. An initial evaluation shall be conducted by the inspector.
2. Evaluation of existing conditions shall be conducted for the purpose of identifying and assessing the condition of the existing EIFS cladding.
3. Existing conditions are documented based on interviews with the owner, building maintenance supervisor and other personnel as appropriate.
4. This may involve visual observations, destructive as well as nondestructive examination methods as determined by the inspector.

E. Assessment of Existing Conditions

1. The inspector shall identify all necessary forensic investigations based on the initial survey and level of repair desired by the owner.
2. This may include visual observation as well as water penetration testing or other tests as necessary to properly assess existing conditions and verify appropriateness of remediation procedures. Refer to the dryvitCARE Inspection Report Existing Condition Survey (Section Two).
3. The inspector shall present a written report identifying the recommended level of repair to properly restore the cladding to a functional state in accordance with sound engineering judgment and the owner's expectations.
4. Scope of work may include, but not necessarily limited to, repairs to the EIFS, flashings, sealants, roof, windows, doors and other building envelope components as deemed appropriate by the inspector. Such conditions shall be identified to the owner and a determination made as to necessary repairs. Repairs to any components of the building envelope other than the EIFS, shall be completed per that product manufacturer's published recommendations and industry standards.
5. The intent of repairs is to bring the building envelope into a serviceable condition that will provide the owner with a durable, long lasting enclosure, in compliance with his communicated expectations.

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F. Repair/Restoration of the EIFS Cladding

1. Repairs to the EIFS cladding shall follow published Dryvit repair procedures as detailed in the dryvitCARE Repair Procedures, DS498.
2. Restoration of the EIFS can include any of the following:
 - a. clean and recoat with an acrylic coating.
 - b. clean, repair damage and recoat with an elastomeric coating.
 - c. clean, repair damage and overclad with a new reinforced base coat and finish.
 - d. partial removal of sections of existing EIFS cladding and replace with a new Dryvit EIF System.

G. Frequency of Inspections for EIFS Repairs (suggested)

1. As a minimum, the inspector shall visit the project weekly while work is in progress and document existing conditions. Any deviations from recommended procedures and contract documents shall be documented and forwarded to the contractor and owner. All deviations shall be resolved to the satisfaction of the inspector and verified during the following visit.
2. The owner may require that the inspector inspect the project more frequently than listed. This should be agreed upon between the owner and the inspector.
3. Field Inspection
 - a. Inspections shall be conducted by the inspector according to the agreed schedule and include the following as appropriate:
 - 1) material storage
 - 2) inspection of installed substrates
 - 3) temporary weather protection of substrate, and repairs until installation is complete (if applicable)
 - 4) installation of drainage medium (if applicable)
 - 5) inspection of flashing and sealants
 - 6) inspection of interface between EIFS and other claddings
 - 7) installation of insulation board
 - 8) application of base coat and reinforcing mesh
 - 9) application of finish or other coating
 - b. The third-party inspector shall complete a dryvitCARE Inspection Report Existing Conditions Survey (Section Two) and the dryvitCARE Site Inspection Checklist Worksheet (Section Three) during each inspection of the project.
4. Final Inspection of EIFS Repairs
 - a. A final inspection of the project should be conducted jointly by the owner, inspector, general contractor/construction manager, and contractor for the purpose of final review and acceptance of the work by the owner.

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- b. Each of the above parties should acknowledge in writing acceptance of the completed dryvitCARE renovation prior to request for and issuance of any dryvitCARE Warranty. The inspector shall complete the dryvitCARE Inspection Certificate (Section Four) certifying that the inspections were completed in accordance with the contract documents. A copy of the initial Inspector's Scope of Work, completed dryvitCARE Inspection Certificate, dryvitCARE Inspection Report Existing Conditions Surveys and dryvitCARE Site Inspection Checklist Worksheets identifying the project name should be forwarded to:

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SECTION TWO

**dryvitCARE™ INSPECTION REPORT
EXISTING CONDITIONS SURVEY**

| | |
|---|---------------------------------|
| File No.: | Date: |
| Project Name/Address: | Contractor Name/Address: |
| 1. Identification of Existing Conditions | |
| 1.1. Dryvit EIF System Identification: | |
| 1.2. Outsulation® | |
| 1.3. Outsulation® Plus MD System® | |
| 1.4. Outsulation MD System® | |
| 1.5. Infinity® | |
| 1.6. Outsulation® LCMD | |
| 1.6.1. System 1 | |
| 1.6.2. System 2 | |
| 1.6.3. System 3 | |
| 1.6.4. System 4 | |
| 1.6.5 System 5 | |
| 1.7. Other (describe) | |
| 2. General Condition Assessment | |
| 2.1. Surface needs cleaning | |
| 2.2. Insulation bonded/attached to substrate | |
| 2.3. Base coat bonded to insulation board | |
| 2.4. Finish bonded to base coat | |
| 2.5. Surface cracks needing repair | |
| 2.6. Structural cracks | |
| 2.7. Impact damage | |
| 2.8. Proper gap for sealant joints | |
| 2.9. Expansion joint at floor line – wood frame construction | |
| 2.10. Expansion joint at floor line – non-wood frame construction | |
| 2.11. Expansion joints at changes in substrates | |
| 2.12. Expansion joints at building expansion joints | |
| 2.13. Other (describe) | |

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SECTION TWO (Cont'd)

**dryvitCARE™ INSPECTION REPORT
EXISTING CONDITIONS SURVEY**

| | |
|--|--|
| 3. Scope of Necessary EIFS Repairs | |
| 3.1. Clean the EIFS Surface | |
| 3.2. Acrylic recoat | |
| 3.3. Crack repair and elastomeric recoat | |
| 3.4. Crack repair with reinforced base coat and finish | |
| 3.5. Remove and replace with new EIFS | |
| 3.6. Other (describe) | |





SECTION THREE

dryvitCARE™ Site Inspection Checklist Worksheet

This section should be completed each time the CARE inspector visits the project site. Attach to Section Two at the completion of each visit.

| | | | | | |
|--|-------------------|------------|------------|-----------|------------|
| A. Weather | | | | | |
| 1. Temperature at: | | | | AM PM | |
| 2. Weather condition (clear, cloudy, rain, etc.): | | | | | |
| 3. 24-hour forecast: | | | | | |
| 4. Wind/speed: | | | | | |
| 5. Notes: | | | | | |
| | | | YES | NO | N/A |
| B. Materials and Storage | Applicable | N/A | | | |
| 1. All materials stored under cover and protected from weather | | | | | |
| 2. When outside storage is required | | | | | |
| a. Materials stacked off the ground | | | | | |
| b. Protected from weather | | | | | |
| c. Temperature in storage area greater than 4 °C (40 °F) and less than 32 °C (90 °F) | | | | | |
| 3. Insulation board | | | | | |
| a. Stored under cover | | | | | |
| b. Stacked flat | | | | | |
| c. Not exposed to direct sunlight | | | | | |



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SECTION THREE (Cont'd)

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| | | | YES | NO | N/A |
|--|------------|-----|-----|----------|-----|
| C. Inspection of Installed Substrate | Applicable | N/A | | | |
| 1. Substrate type: | | | | | |
| 2. Thickness of sheathing: | | | | inch(es) | |
| 3. Framing c to c: | | | | inch(es) | |
| 4. Date of sheathing installation (Mo/Day/Yr): | | | | | |
| a. Correct orientation of sheathing | | | | | |
| b. Sheathing joints are offset from corners of openings | | | | | |
| c. Edges of sheathing are supported by framing members | | | | | |
| d. Fastener type and spacing per contract documents | | | | | |
| e. Paper faced gypsum facing laps to the inside | | | | | |
| f. Paper faced gypsum paper firmly attached to core | | | | | |
| g. Glass mat gypsum sheathing oriented with gold coating outward | | | | | |
| h. Wood based sheathings properly gapped at edges and ends | | | | | |
| 5. Dimensional tolerance | | | | | |
| a. Flat within 6.4 mm (1/4 in) in a 1.2 m (4 ft) radius | | | | | |
| 6. Damage exceeding 9.5 mm (3/8 in) | | | | | |
| 7. Clean surface, dry, free of contaminants | | | | | |
| 8. Notes: | | | | | |

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SECTION THREE (Cont'd)

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| | | | YES | NO | N/A |
|--|------------|-----|----------|----|-----|
| D. Water-Resistive Barrier/Air Barrier Installation | Applicable | N/A | | | |
| 1. Trowel, Spray or Roller Applied Membrane | | | | | |
| a. Dryvit Grid Tape™ (sheathing application only) | | | | | |
| 1) 100 mm (4 in) wide supplied by Dryvit Systems, Inc. | | | | | |
| 2) Sheathing joints covered | | | | | |
| 3) Terminations covered (field and panelized) | | | | | |
| 4) Inside and outside corners covered | | | | | |
| 5) Installed at sheathing framing interface for panelized construction | | | | | |
| b. Dryvit Water-Resistive Membrane | | | | | |
| 1) Material identification | | | | | |
| a) Manufactured and supplied by Dryvit Systems, Inc. Name of product: | | | | | |
| 2) Proper type for installed substrate | | | | | |
| 3) Ambient air temperature: | | | °F or °C | | |
| 4) Wall temperature: | | | °F or °C | | |
| 5) Mixing proportion (if applicable) | | | | | |
| a) Lump free Type I or II Portland cement | | | | | |
| b) Clean potable water | | | | | |

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| | | | YES | NO | N/A |
|--|------------|-----|----------|----|-----|
| D. Water-Resistive Barrier/Air Barrier Installation Cont'd | Applicable | N/A | | | |
| 6) Pre-spot fasteners and Grid Tape locations | | | | | |
| 7) Continuous layer of membrane applied over entire surface area | | | | | |
| c. Dryvit Flashing Tape™ (sheathing applications only) | | | | | |
| 1) 100 mm, 150 mm or 230 mm (4 in, 6 in, or 9 in) wide polyethylene film backed with a rubberized asphalt supplied by Dryvit Systems, Inc. | | | | | |
| 2) Rough openings prepared in weatherboard fashion | | | | | |
| 3) Substrate expansion joints covered | | | | | |
| 4) Air and surface temperature: | | | °F or °C | | |
| 5) Surface is clean, dry and smooth | | | | | |
| 6) Dryvit Flashing Tape Surface Conditioner™ used | | | | | |
| 7) Flashing tape extends 51 mm (2 in) over the water-resistive membrane. | | | | | |
| d. Notes: | | | | | |
| 2. Sheet Type Water-Resistive Membranes | | | | | |
| a. Type of sheet material: | | | | | |
| b. Dryvit Flashing Tape installed as indicated in D.1.c | | | | | |
| c. Water-resistive barrier installed horizontally in a weatherboard fashion | | | | | |

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| | | | YES | NO | N/A |
|--|------------|-----|-----|----|-----|
| E. Installation of Drainage Medium | Applicable | N/A | | | |
| 1. Type of Drainage Medium | | | | | |
| a. Dryvit Drainage Mat™ | | | | | |
| b. Tyvek® StuccoWrap | | | | | |
| c. Metal or plastic lath | | | | | |
| d. Grooved insulation board | | | | | |
| 1) spacing of grooves c to c | | | | | |
| a) 300 mm (12 in) (Outsulation MD) | | | | | |
| 2) Proper width and depth of groove | | | | | |
| 2. Drainage medium installed in accordance with contract documents and Dryvit specifications | | | | | |
| F. Insulation Board Inspection/Installation | Applicable | N/A | | | |
| 1. Inspection | | | | | |
| a. Supplied by a listed supplier of insulation | | | | | |
| b. Proper type of given project | | | | | |
| 1) Expanded polystyrene (EPS) | | | | | |
| c. Proper packaging | | | | | |
| 1) Polyethylene bags (EPS) | | | | | |
| 2) Lot number marked on board | | | | | |
| d. Proper markings on board | | | | | |
| 1) Each board edge marked | | | | | |
| 2) One board each package marked both faces | | | | | |
| e. Dimensional tolerance | | | | | |
| 1) EPS | | | | | |
| a) Thickness 19 – 25 mm (3/4 in – 1 in) = 1.6 mm (+1/16 in); 25.4 – 102 mm (1 in – 4 in) +/- 1/16 in | | | | | |
| b) Width = +/- 1.6 mm (+/- 1/16 in) | | | | | |

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| | | | YES | NO | N/A |
|--|------------|-----|-----|----------|-----|
| F. Insulation Board Inspection/Installation (Cont'd) | Applicable | N/A | | | |
| c) Length = +/- 1.6 mm (+/- 1/16 in) | | | | | |
| d) Squareness < 0.8 mm (1/32 in) in 300 mm (12 in) | | | | | |
| e) Flatness < 0.8 mm (1/32 in) in a 1.2 m (4 ft) radius. | | | | | |
| f. Notes: | | | | | |
| 2. Installation | | | | | |
| a. Date of Installation | | | | | |
| b. Ambient air temperature | | | | °F or °C | |
| c. Wall temperature | | | | °F or °C | |
| d. Material identification - adhesive | | | | | |
| 1) Manufactured and supplied by Dryvit Systems, Inc. | | | | | |
| 2) Name of product: | | | | | |
| 3) Batch number: | | | | | |
| 4) Proper type for installed substrate | | | | | |
| 5) Mixing proportion | | | | | |
| a) Lump free Type I or II Portland cement | | | | | |
| b) Clean potable water | | | | | |
| 6) Notch trowel 9.5 mm wide x 51 mm high x 38 mm apart (3/8 in wide x 1/2 in high x 1 1/2 in apart) used to apply adhesive | | | | | |
| 7) Adhesive applied with ribbons running vertically along width of insulation board | | | | | |

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| | | | YES | NO | N/A |
|--|------------|-----|-----|----|-----|
| F. Insulation Board Inspection/Installation (Cont'd) | Applicable | N/A | | | |
| e. Material identification – mechanical fasteners | | | | | |
| 1) Proper type for system being installed | | | | | |
| 2) Corrosion resistant fasteners | | | | | |
| 3) Proper length of fastener | | | | | |
| 4) Washer plates flush with surface of insulation board | | | | | |
| f. Dryvit Detail Mesh® attached to substrate for back wrapping at system terminations | | | | | |
| g. Insulation boards installed with long edges oriented horizontally | | | | | |
| h. Insulation boards installed with long edges oriented horizontally | | | | | |
| i. Insulation board joints tightly butted | | | | | |
| j. Insulation board joints offset from sheathing board joints a minimum of 200 mm (8 in) | | | | | |
| k. Insulation board joints at all inside and outside corners are staggered and interlocked | | | | | |
| l. Insulation board cut in a "L" shaped piece around all openings | | | | | |
| m. Insulation board terminates a minimum of 200 mm (8 in) above finished grade | | | | | |
| n. Insulation board terminates with proper gap at the abutment of dissimilar materials | | | | | |

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| | | | YES | NO | N/A |
|---|-------------------|------------|-----|----|-----|
| F. Insulation Board Inspection/Installation (Cont'd) | Applicable | N/A | | | |
| o. Expansion joints positioned at proper location | | | | | |
| p. Minimum thickness of insulation board at base of aesthetic reveals is 19 mm (3/4 in) | | | | | |
| q. Projecting features incorporate proper slope requirements | | | | | |
| r. Projecting features pattern per contract documents | | | | | |
| s. Fasteners installed into framing members or nailable substrate | | | | | |
| t. 100% of insulation board (EPS) sanded flat | | | | | |
| u. Slivers of insulation board/approved foam spray installed where required | | | | | |
| v. Notes: | | | | | |
| G. Application of Base Coat and Reinforcing Mesh | Applicable | N/A | | | |
| 1. Inspection of Installed Insulation | | | | | |
| a. Surface of insulation board has been sanded to remove all irregularities | | | | | |
| b. All insulation boards are tightly butted or filled with insulating material | | | | | |
| c. Surface of insulation board is clean, dry, flat and all sanding dust is removed | | | | | |
| d. There is no yellowing of insulation board from extended exposure | | | | | |
| e. Damaged insulation board has been replaced | | | | | |

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| | | | YES | NO | N/A |
|--|------------|-----|----------|----|-----|
| G. Application of Base Coat and Reinforcing Mesh (Cont'd) | Applicable | N/A | | | |
| 2. Base Coat and Reinforcing Mesh Application | | | | | |
| a. Manufactured and/or supplied by Dryvit Systems, Inc. | | | | | |
| b. Name of product: | | | | | |
| c. Batch number: | | | | | |
| d. Proper product for application | | | | | |
| e. Mixing proportion | | | | | |
| 1) Lump free Type I or II Portland cement | | | | | |
| 2) Clean potable water | | | | | |
| f. Type of reinforcing mesh: | | | | | |
| g. Date of installation | | | | | |
| h. Ambient air temperature: | | | °F or °C | | |
| i. Wall temperature: | | | °F or °C | | |
| j. Base coat mixture used to embed previously installed Detail Mesh for back wrapping | | | | | |
| k. Corner Mesh™ when specified is embedded in base coat prior to installing overall base coat | | | | | |
| l. Corners of all openings have additional reinforcement as shown in Dryvit Application Instructions | | | | | |
| m. Base coat applied to wall surface prior to embedding reinforcing mesh | | | | | |
| n. Panzer® Mesh installed as first layer (where specified) | | | | | |
| o. Edges of Panzer mesh butted tightly, not overlapped | | | | | |

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| | | | YES | NO | N/A |
|---|------------|-----|---------|----|-----|
| G. Application of Base Coat and Reinforcing Mesh (Cont'd) | Applicable | N/A | | | |
| p. Panzer Mesh totally embedded in base coat | | | | | |
| q. Base coat allowed to dry minimum of 24 hours prior to applying a second layer | | | | | |
| r. Standard base coat | | | | | |
| 1) Base coat applied to wall surface prior to embedding reinforcing mesh | | | | | |
| 2) Reinforcing mesh overlapped a minimum of 64 mm (2 1/2 in) at all edges | | | | | |
| 3) Applied opposite direction of Panzer mesh when used as a second layer | | | | | |
| 4) Offset a minimum of 200 mm (8 in) from Panzer mesh edges (when applicable) | | | | | |
| 5) Reinforcing mesh not lapped within 200 mm (8 in) of any corner | | | | | |
| 6) Reinforcing mesh continuous through aesthetic reveals | | | | | |
| 7) All foam shapes are covered with base coat and reinforcing mesh | | | | | |
| 8) Reinforcing mesh is totally embedded. There is no mesh color visible | | | | | |
| 9) Base coat mixture applied smoothly and free of trowel marks | | | | | |
| 10) For panels applications base coat and reinforcing mesh is extended onto framing | | | | | |
| s. Base coat coverage per pail: | | | Sq. Ft. | | |
| t. Notes: | | | | | |

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| | | | YES | NO | N/A |
|--|------------|-----|-----|----------|-----|
| H. Textured Finish Coat/Coating Application | Applicable | N/A | | | |
| 1. Inspection of reinforced base coat | | | | | |
| a. Base coat free of irregularities | | | | | |
| b. Base coat clean, dry, free of dust, dirt, efflorescence or other contaminants | | | | | |
| c. Base coat has no reinforcing mesh show through | | | | | |
| 2. Finish/Coating application | | | | | |
| a. Manufactured and supplied by Dryvit Systems, Inc. | | | | | |
| b. Finish type: | | | | | |
| c. Batch number: | | | | | |
| d. Date of installation: | | | | | |
| e. Ambient air temperature: | | | | °F or °C | |
| f. Wall temperature: | | | | °F or °C | |
| g. Finished mixed in accordance with Dryvit Application Instructions | | | | | |
| h. Amount of water added to each pail: | | | | | |
| i. Application method (spray, trowel, roller): | | | | | |
| j. Finish applied to proper thickness | | | | | |
| k. Finish not installed in joints at terminations, expansion, etc. | | | | | |
| l. All finish material from same batch | | | | | |
| m. Texture and color consistent | | | | | |
| n. Cold Joints | | | | | |
| o. Coverage per 5-gallon pail | | | | | |
| p. Notes: | | | | | |

Dryvit Systems, Inc
 One Energy Way
 West Warwick, RI 02893 USA
 1-800-556-7752
 1-401-822-4100
www.dryvit.com



Third Party Inspection Guidelines for CARE Inspectors



SECTION THREE (Cont'd)

dryvitCARE™ Site Inspection Checklist Worksheet

This section should be completed each time the CARE inspector visits the project site. Attach to Section Two at the completion of each visit.

| | | | YES | NO | N/A |
|--|------------|-----|-----|----|-----|
| I. Flashings (Not components of Dryvit EIF System) | Applicable | N/A | | | |
| 1. Flashing at openings installed per contract documents and Dryvit Installation Details | | | | | |
| 2. Cap flashing installed as soon as practical after installation of Dryvit system | | | | | |
| 3. Cap flashing sloped toward roof | | | | | |
| 4. Roof wall intersection diverters are installed per contract documents and Dryvit installation details for the specific EIF System installed | | | | | |
| 5. Flashing provided in sections is properly sealed | | | | | |
| 6. Flashing extends a minimum of 64 mm (2 1/2 in) over the surface of the Dryvit system | | | | | |
| 7. Flashing includes a drip edge | | | | | |
| 8. Exposed vertical leg of flashing is tight against the surface of the Dryvit system | | | | | |
| 9. Notes: | | | | | |
| J. Sealants (Not part of Dryvit EIF System): | Applicable | N/A | | | |
| 1. Finished joint width is in accordance with contract documents | | | | | |
| 2. Joint width is uniform | | | | | |
| 3. Dryvit Weathercoat™ or Weatherprime® applied over base coat to receive sealant | | | | | |
| 4. Joint to be sealed is clean, dry and frost free | | | | | |
| 5. Date of this installation: | | | | | |

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SECTION THREE (Cont'd)

dryvitCARE™ Site Inspection Checklist Worksheet

This section should be completed each time the CARE inspector visits the project site. Attach to Section Two at the completion of each visit.

| | | | YES | NO | N/A |
|--|-------------------------|-------------------|-----------------|----------|-----|
| I. Flashings (Not components of Dryvit EIF System Cont'd) | Applicable | N/A | | | |
| 6. Ambient air temperature: | | | | °F or °C | |
| 7. Surface temperature | | | | °F or °C | |
| 8. Type of sealant: | | | | | |
| a. Batch number: | | | | | |
| 9. Type of sealant primer: | | | | | |
| a. Batch number: | | | | | |
| 10. Field adhesion test performed by sealant manufacturer | | | | | |
| 11. Sealant primer applied on surface of Dryvit system to be sealed | | | | | |
| 12. Closed cell backer rol installed | | | | | |
| 13. Bond breaker tape installed | | | | | |
| 14. Sealant mixed and applied per manufacturer's instructions | | | | | |
| 15. Proper width to depth ratio | | | | | |
| 16. Sealant property tooled | | | | | |
| 17: Notes: | | | | | |
| List items requiring correction, corrections of previously listed findings and previously listed uncorrected findings: | | | | | |
| Finding | Report Ref./Date | Correction | Complete | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Comments: | | | | | |

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Third Party Inspection Guidelines for CARE Inspectors



To the best of my knowledge, work inspected was in accordance with the project specification and Dryvit Systems, Inc. latest Dryvit * _____ System Specifications, dated _____, Application Instructions, dated _____, and Installation Details, dated _____, except as noted above. In case of discrepancy between the Specifications, Application Instructions and Details and Dryvit's suggested Specifications, Application Instructions and Details for the system being installed, the inspector shall have the design professional confirm in writing which documents apply.

* Fill in name of system.

| | |
|------------------|--|
| Signed: | |
| Date: | |
| Print Full Name: | |
| Company Name: | |
| Address: | |
| Telephone: | |
| E-mail Address: | |

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SECTION FOUR
dryvitCARE™ INSPECTION CERTIFICATION

| | |
|--------------------------------|-------|
| To: (Owner) | Date: |
| RE: Project: | |
| Address: | |
| City/State: | |
| Final Inspection Report | |
| Type of Dryvit System: | |
| Outsulation® | |
| Outsulation® Plus MD System® | |
| Outsulation MD System® | |
| Infinity® | |
| Outsulation® LCMD | |
| System 1 | |
| System 2 | |
| System 3 | |
| System 4 | |
| System 5 | |

This is to certify that I performed an inspection of the Dryvit _____ System at the above address.

Based upon my personal observation and written reports of the installation of the Dryvit system, it is my judgment that the inspected installation was performed, to the best of my knowledge, in accordance with the approved plans, the most current Dryvit _____ Specifications, dated _____, Application Instructions, dated _____, and Installation Details, dated _____.

Very truly yours,

| | | | |
|-----------|-------|-------------|-------|
| Inspector | | Contractor | |
| By: | Date: | By: | Date: |
| Title: | | Title: | |
| Owner: | | Applicator: | |
| By: | Date: | By: | Date: |
| Title: | | Title: | |

A copy of this certificate should be returned to Dryvit Systems, Inc. accompanied with the dryvitCARE Inspection Report Existing Conditions Survey (Section Two and dryvitCARE Site Inspection Checklist Worksheets (Section Three)

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