

GLAZING SOLUTIONS

STRUCTURAL GLAZING TESTING INITIATION FORM

Project Name & Location:		
Sales Representative:		
Customer Name:		
Wind Load:		
Company Name:		
Company Address:		
Select all that apply: Structural Glazing Type:	1 Sided 4 Sided	2 Sided 3 Sided Sloped Glazing
Structural Glazing Type:	Spectrem 2	Proglaze SSG
Select all that apply: Submitted Metal for Testing:	Anodized Paint (below f Manufacturer: Paint Color: Paint Code:	Alodine iields)
Select all that apply:		
Glass Manufcaturer:		
Type:	Monolithic	Laminated Insulated

Coatings Manufacture	er:					
Coating Nam	e:					
Coating Colo	or:					
Select all that appl	ly:					
Spacer Manufcaturer	:					
RubberType:	: Silicone	EPDM	SCR	Other		
Gasket Manufcaturer	:					
RubberType:	: Silicone	EPDM	SCR	Other		
Setting Block Manufcature	r:					
RubberType:	: Silicone	EPDM	SCR	Other		
Select all that appl	ly:					
Test Procedures:	Tab Adhesion Appendix)	ı (ASTM 1193	ASTM C1248 (optional)	Stain Testing		
	ASTM C794 A	ASTM C794 Adhesion-in-Peel		ASTM 1087 Compatibility for:		
Select all that appl	lv.		Accessories	Glass Coatings		
Primers: TREMprime Silicone Metal Primer						
	TREMprime Silicone Porous Primer					
	imer					
Sample Sizes and Requi	rements:					
 Tab Adhesion - metal requisealant ASTM C794 - metal requimetal per sealant ASTM C1087 - accessorie 	rements: square fla	t metal, 4 samples	s of 4" x 6" (10 cm x	15 cm) project specific		
Additional Comments:						

Send Samples to: Ray Walker 3735 Green Rd. Beachwood, OH 44122