

THE EMSEAL CHECKLIST

A SIKA COMPANY		Company		Data	
				Date Email	
Job Name Job Location (City & State)					
INS	STALLATION LOCA	TION	CONSTRUCTION TYPE	FIRE RATING	
Interior Exterior	Wall Floor/Deck Roof	Above Grade Below Grade Submerged	New Construction Retrofit Construction Fire Rating: 1-hr 2-hr 3		
			N GAP INFORMATION		
Joint Gap Width(s): to (over its			Joint Substrate De	rotal Length (ft or m)	
Have Gap Dimensions Been Field Measured? Yes / No Substrate Surface Temp Ambient Temp			Membrane Tie-in?	Substrate Composition: (e.g., concrete, brick, metal, etc.) Membrane Tie-in?: Yes / No Type Metal Pour Stops?: Yes / No	
Movement (if known): (e.g., ± thermal; ± shear, etc.) Joint is: Primary S Secondar					
Are There Trans	sitions? Yes (exp	olain) / No	How Does the Join	t Terminate?	
	Eo	D HODIZONTAL DEGI	14 (FLOOR and BOOK JOINTS	2 (ONLY)	
DECK C	ONSTRUCTION	R HORIZONTAL DECI	K/FLOOR and ROOF JOINTS	6 (ONLY)	
Condition? Yes / No		_	X		
Is this a Split S Condition? Yes / No				x	
Does the Joint have Blockout Yes / No	s?	16			
Traffic Types (check Car Bus Other		one a wall instead of sion. If more that	slab width dimemsions at each "x" .f a slab, please denote that "x" as "W in one joint occurs within the same i propraite dimensions. Attach addition	/all" instead of giving a dimen- mmediate area, please draw	
	Please ii		tails when submitting checkli	st to EMSEAL	
Architect:	Engine	eer:	Contractor:	_ Owner/Developer:	