

NEPCOAT FIELD HISTORY REQUIREMENT TWO-YEAR PERFORMANCE

for _____ (Coating Manufacturer)

COATING SYSTEM

(Prime Coat)

(Intermediate Coat)

(Finish Coat)

In the space provided, identify five bridges which have been coated with the above-named coating system with a minimum quantity of 400 liters (100 gallons) for all coats, and on which the system has performed successfully for a minimum of two (2) years, as required by the NEPCOAT Specification Criteria. Provide all information requested. Include an existing bridge(s) with field-applied coatings, if available.

Bridge ID: _____ Roadway: _____ Feature crossed: _____ Project Type: (circle one) New bridge Existing bridge Bridge Type: (circle one) Truss Girder Other _____ Owner: _____ Address: _____ Contact: _____ Tel. _____	Surface preparation: (circle one) SP3 SP15 SP6 SP10 SP5 Coating applied in: (circle one) Shop Field Approximate area coated (sf): _____ Method applied: _____ Start application: _____ End: _____ Specified thickness of all coats: _____ NACE QA Inspection: (circle one) Yes No Quantity applied (estimated): _____ gallons Chloride remediation required: (circle one) Yes No
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Bridge ID: _____	Surface preparation: (circle one) SP3 SP15 SP6 SP10 SP5
Roadway: _____	Coating applied in: (circle one) Shop Field
Feature crossed: _____	Approximate area coated (sf): _____
Project Type: (circle one) New bridge Existing bridge	Method applied: _____
Bridge Type: (circle one) Truss Girder Other _____	Start application: _____ End: _____
Owner: _____	Specified thickness of all coats: _____
Address: _____	NACE QA Inspection: (circle one) Yes No
Contact: _____	Quantity applied (estimated): _____ gallons
Tel. _____	Chloride remediation required: (circle one) Yes No

Bridge ID: _____	Surface preparation: (circle one) SP3 SP15 SP6 SP10 SP5
Roadway: _____	Coating applied in: (circle one) Shop Field
Feature crossed: _____	Approximate area coated (sf): _____
Project Type: (circle one) New bridge Existing bridge	Method applied: _____
Bridge Type: (circle one) Truss Girder Other _____	Start application: _____ End: _____
Owner: _____	Specified thickness of all coats: _____
Address: _____	NACE QA Inspection: (circle one) Yes No
Contact: _____	Quantity applied (estimated): _____ gallons
Tel. _____	Chloride remediation required: (circle one) Yes No

I, _____, do hereby certify that the listed coating system has been applied to the above-named bridges and has performed successfully on each bridge for a minimum of two (2) years.

“Subscribed and sworn to me

 Signatory of Coating Manufacturer

this _____ day of _____, 20_____”

 Date

 Notary Public
 Date Commission Expires: _____