



Air and Water-Resistive Barrier Coatings Laboratory Test Request Form

Month Day Year

Today's Date

Customer

Company Name

Contact Person

Address

City

State

Zip

Project

Name

Physical Project Address

City

State

Zip

Preferred Cleaning Solvent <input type="checkbox"/> IPA <input type="checkbox"/> Xylene <input type="checkbox"/> Acetone <input type="checkbox"/> Toluene <input type="checkbox"/> Other:	Product										Test							
	GE Elemax* 2600 AWB 17 mil dft	GE Elemax* 5000 liquid flashing 20 mil	GE Elemax* SS Flashing	RF-100 reinforcing fabric	UltraSpan* UT200	UltraSpan* USM Corners	Other:	Other:	Other:	Other:	Adhesion—ASTM D4541	Adhesion—Modified C794	Compatibility	Other:	Other:	Other:	Other:	
Preferred Silicone Primer <input type="checkbox"/> SS4044P <input type="checkbox"/> GE to recommend <input type="checkbox"/> SS4179 <input type="checkbox"/> SS80	Sample Description Be specific as to manufacturer/type/ID# and identify which surface is to be tested (e.g., face, edge, back, etc.)																	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

All Non-GE sealant submitted MUST be accompanied by MSDS paperwork.

Address Report To

Company Name

Contact Person

Address

City

State

Zip

Phone Number

Fax Number

Email

Minimum Sample Sizes and Quantity

Sheathing: One 12" x 12" per product
Other substrate: Must be 4" x 4" min.

For EASTERN U.S., mail form to:
 Construction Sealants Lab Bldg. 25
 Attn: Randy Rocheleau
 Momentive Performance Materials Inc.
 260 Hudson River Road
 Waterford, NY, 12188
 Phone: +1 (518) 233-2818
 Email: randall.rocheleau@momentive.com

FOR WESTERN U.S., mail form to:
 Sealants Lab
 Attn: Gene Dorman
 Momentive Performance Materials Inc.
 4045 Cheyenne Court
 Chino, CA 91710
 Phone: +1 (909) 517-2575
 Email: Gene.Dorman@momentive.com

A copy of this form must be included with the substrates

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