



## STUCCO/PLASTER INSTALLATION FORM

JOB ADDRESS

Lot #: \_\_\_\_\_

Subdivision: \_\_\_\_\_

Street Address: \_\_\_\_\_

Coating System Trade Name:

\_\_\_\_\_

Name of Coating Manufacturer:

\_\_\_\_\_

Evaluation Report # of Recognized Testing Agency:

\_\_\_\_\_

Stucco/Plaster Contractor Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

Approved contractor number as issued by coating manufacturer: # \_\_\_\_\_

Failure to complete any of the information requested will result in denial or revocation of occupancy.

This is to certify that the exterior coating system applied to the building exterior at the above address has been installed in accordance with the evaluation report specified and the manufacturer's installation instructions.

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Signature of Authorized Representative  
of Stucco/Plaster Contractor

\_\_\_\_\_  
Date

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
/ /

*This installation approval form must be presented to the building inspector after completion of work and prior to final inspection.*