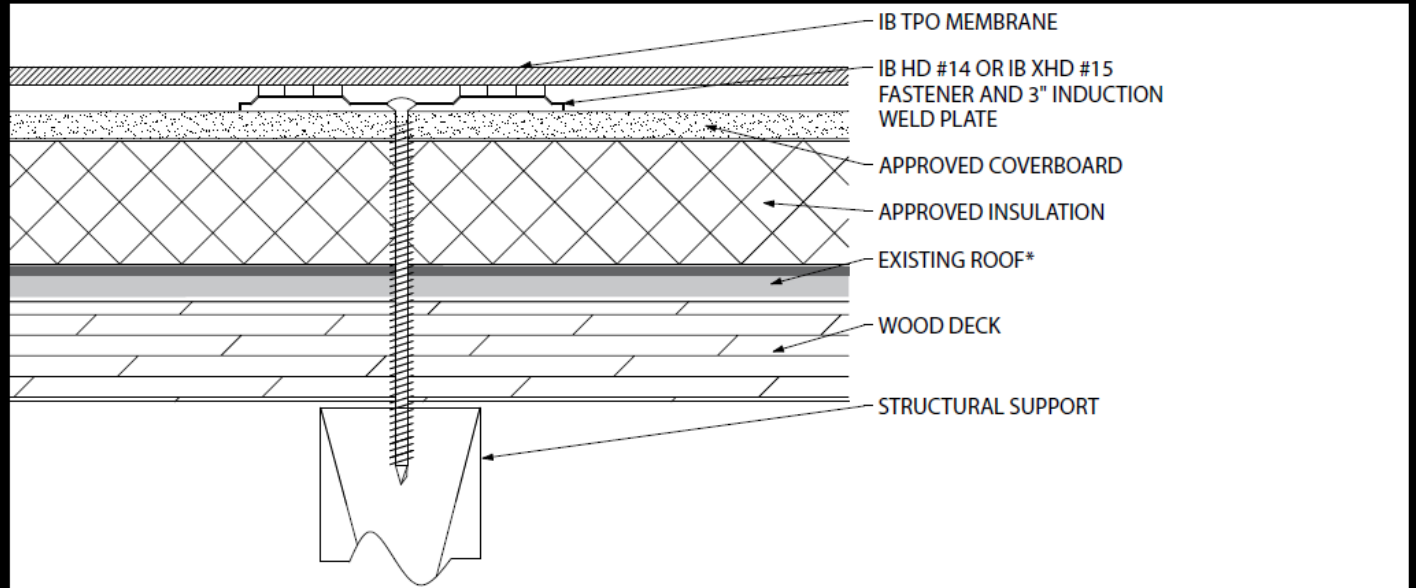




Induction Welded TPO Membrane - Cover Board - Insulation - Existing Roof - Wood Joist (Recover)



Deck Type	Insulation/Cover Board (over Existing Roof) ¹ Type ^{2,3,4}	Insulation Securement			IB Membrane Securement** Attachment
		Preliminary Securement	Induction Attachment	Density	
Min. 7/16" OSB or 15/32" Plywood	Approved Insulation & Approved Cover Board	Min. IB SD #12, 3" IB Insulation Plate (5 per 4' x 8')	IB HD #14 or XHD #15 and Rhinobond TPO Plate, Trufast TPO IW Plate, or isoweld TPO Plate	12" oc. x max. rows of 96" oc. along wood structural members	Plate bonded
Min. 7/16" OSB or 15/32" Plywood	Approved Insulation & Approved Cover Board	Min. IB SD #12, 3" IB Insulation Plate (5 per 4' x 8')	IB HD #14 or XHD #15 and Rhinobond TPO Plate, Trufast TPO IW Plate, or isoweld TPO Plate	24" oc. x max. rows of 48" oc. along wood structural members	Plate bonded
Min. 7/16" OSB or 15/32" Plywood	Approved Insulation & Approved Cover Board	Min. IB SD #12, 3" IB Insulation Plate (5 per 4' x 8')	IB HD #14 or XHD #15 and Rhinobond TPO Plate, Trufast TPO IW Plate, or isoweld TPO Plate	18" oc. x max. rows of 48" oc. along wood structural members	Plate bonded
Min. 15/32" Plywood	Approved Insulation & Approved Cover Board	Min. IB SD #12, 3" IB Insulation Plate (5 per 4' x 8')	IB HD #14 or XHD #15 and Rhinobond TPO Plate, Trufast TPO IW Plate, or isoweld TPO Plate	9" oc. x max. rows of 48" oc. along wood structural members	Plate bonded
Min. 15/32" Plywood	Approved Insulation & Approved Cover Board	Min. IB SD #12, 3" IB Insulation Plate (5 per 4' x 8')	IB HD #14 or XHD #15 and Rhinobond TPO Plate, Trufast TPO IW Plate, or isoweld TPO Plate	6" oc. x max. rows of 48" oc. along wood structural members	Plate bonded
Min. 15/32" Plywood	Approved Insulation & Approved Cover Board	Min. IB SD #12, 3" IB Insulation Plate (5 per 4' x 8')	IB HD #14 or XHD #15 and Rhinobond TPO Plate, Trufast TPO IW Plate, or isoweld TPO Plate	24" oc. x max. rows of 24" oc. along wood structural members	Plate bonded
Min. 15/32" Plywood	Approved Insulation & Approved Cover Board	Min. IB SD #12, 3" IB Insulation Plate (5 per 4' x 8')	IB XHD #15 and Rhinobond TPO Plate	16" oc. x max. rows of 24" oc. along wood structural members	Plate bonded

¹Existing Roof: APP or SBS modified bitumen, smooth or granule surfaced asphaltic built-up roof, or single-ply membrane (CPA, CSPE, EPDM, PVC, or TPO)

²Approved Insulation: IB Energy Board II or III, or IB Approved UL Classified Polyisocyanurate, IB Approved UL Classified Expanded Polystyrene, IB Approved UL Classified Extruded Polystyrene Insulation

³Approved Cover Board: DensDeck, DensDeck Prime, DensDeck StormX Prime, Securock Ultralight Glass-Mat, Securock Ultralight Coated Glass-Mat, Securock Gypsum Fiber Board, DEXcell Glass-Mat Roof Board, or DEXcell FA Glass Mat Roof Board, minimum 1/4" thickness; or minimum 7/16" DEXcell Cement Roof Board; or minimum 1/2" IB HD ISO-J, or 1/2" IB Recovery Energy Board III-J.

⁴The use of some IB Approved Insulations/Cover Boards and or combinations thereof may not achieve UL Classification.

System Uplift Note(s): **Refer to applicable Approval Guide for System Code and/or FM Approvals Information. *Refer to Substrate Resistance Table for required pull-out values.**

For additional information about IB Roof Systems requirements, recommendations, installation details, approvals, and limitations for the above assemblies, please refer to the latest edition of the IB Roof Systems Specifications Manual. For Technical Services please contact IB Technical Department at 800-426-1626.

Membranes:		Membrane Color:				Warranty Length**				Warranty Type**	
IB TPO SM 60 Mil	White*	Gray	Tan	10 Year	15 Year	20 Year	Contractor Warranty Only		Total Systems - No Dollar Limit (TSW)		
IB TPO SM 80 Mil	White*	Gray	Tan	10 Year	15 Year	20 Year	Warranty Plus (WP)		Commercial Limited Material Warranty (CLMW)		
[*] Meets CRRC, Title 24, LEED (SRI)				^{**} Refer to Warranty Selection Guide for Warranty Riders, Term Length Limitations, and eligibility requirements of the IB Warranty Program				Residential Limited Material Warranty (RLMW)			

Submitted By:		Project Name:	
Company Name:		Address:	
Email/Phone:		City/State:	