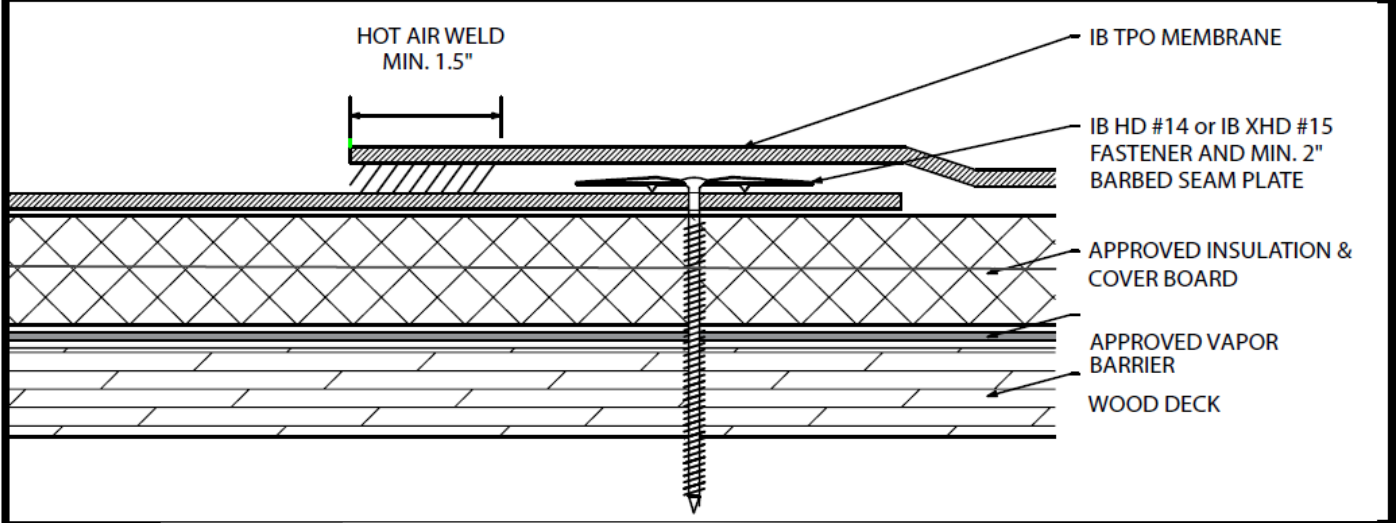


Mechanically Attached TPO Membrane - Insulation - Cover Board - Vapor Barrier - Wood Deck (New or Tear-Off)



Deck Type	Vapor Barrier	Insulation/Cover Board			IB Membrane Securement*	
	Type ¹	Type ^{2,3,4}	Attachment	Fasteners/Plate	Fasteners**	Attachment***
Min. 7/16" OSB	Approved Vapor Barrier	Approved Insulation & Approved Cover Board	1 per 6.4 Sq. Ft. (5 per 4' x 8')	Min. IB SD #12, 3" IB Insulation Plate	IB HD #14 or XHD #15, IB 2-3/8" Barbed Seam Plate	In-Seam @ 6" oc. x 90" max width
Min. 5/8" OSB	Approved Vapor Barrier	Approved Insulation & Approved Cover Board	1 per 6.4 Sq. Ft. (5 per 4' x 8')	Min. IB SD #12, 3" IB Insulation Plate	IB HD #14 or XHD #15, IB 2-3/8" Barbed Seam Plate	In-Seam @ 12" oc. x 90" max width
Min. 1/2" Plywood	Approved Vapor Barrier	Approved Insulation & Approved Cover Board	1 per 6.4 Sq. Ft. (5 per 4' x 8')	Min. IB SD #12, 3" IB Insulation Plate	IB HD #14 or XHD #15, IB 2-3/8" Barbed Seam Plate	In-Seam @ 6" oc. x 90" max width
Min. 1/2" Plywood	Approved Vapor Barrier	Approved Insulation & Approved Cover Board	1 per 6.4 Sq. Ft. (5 per 4' x 8')	Min. IB SD #12, 3" IB Insulation Plate	IB XHD #15, IB 2-3/8" Barbed Seam Plate	In-Seam @ 12" oc. x 66" max width
Min. 19/32" Plywood	Approved Vapor Barrier	Approved Insulation & Approved Cover Board	1 per 6.4 Sq. Ft. (5 per 4' x 8')	Min. IB SD #12, 3" IB Insulation Plate	IB XHD #15, IB 2-3/8" Barbed Seam Plate	In-Seam @ 6" oc. x 90" max width
Min. 19/32" Plywood	Approved Vapor Barrier	Approved Insulation & Approved Cover Board	1 per 6.4 Sq. Ft. (5 per 4' x 8')	Min. IB SD #12, 3" IB Insulation Plate	IB XHD #15, IB 2-3/8" Barbed Seam Plate	In-Seam @ 12" oc. x 66" max width
Min. 3/4" Plywood	Approved Vapor Barrier	Approved Insulation & Approved Cover Board	1 per 6.4 Sq. Ft. (5 per 4' x 8')	Min. IB SD #12, 3" IB Insulation Plate	IB XHD #15, IB 2-3/8" Barbed Seam Plate	In-Seam @ 12" oc. x 90" max width
Min. 1" Wood Plank	Approved Vapor Barrier	Approved Insulation & Approved Cover Board	1 per 6.4 Sq. Ft. (5 per 4' x 8')	Min. IB SD #12, 3" IB Insulation Plate	IB XHD #15, IB 2-3/8" Barbed Seam Plate	In-Seam @ 12" oc. x 90" max width

¹Approved Vapor Barrier: IBarrier SA Membrane, IBarrier SA 106, IBarrier FG SAR, IBarrier XP SA Membrane, applied using self-adhesive techniques
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 vapor barrier combinations 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. *Contact IB Technical Services for maximum sheet width allowed relative to in-seam fastening pattern.

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	
IB TPO SM 80 Mil	White*	Gray		Tan	15 Year	20 Year	25 Year	Total Systems - No Dollar Limit (TSW)	
IB TPO FB 115 Mil	White*				10 Year	15 Year	20 Year	Warranty Plus (WP)	
IB TPO FB 135 Mil	White*				15 Year	20 Year	25 Year	Commercial Limited Material Warranty (CLMW) Residential Limited Material Warranty (RLMW)	

*Meets CRRC, Title 24, LEED (SR)

***Refer to Warranty Selection Guide for Warranty Riders, Term Length Limitations, and eligibility requirements of the IB Warranty Program.

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