

# PLASTERBOARD (WALL / CEILING) SURVEY FORM

Contractor / Specifier Name	
Contact Telephone	
Email Address	

Building Owner	
Site Address	
Contact Email	

Protection Required			
30 Minutes		60 Minutes	
Class 1		Class 0	Class B

Is the protection for			
Your Own Safety		Required for Building Regulations	

Buildings of Multiple Occupancy Information (approximate measurement)	
Estimated or known age of building	
Number of Floors	
Number of Staircases	
Furthest distance from a unit door to staircase or exit point	

About the substrate			
Plaster		Concrete	Wood or wood derivative
Dry lining		Glazed Tiles	If derivative which one?

Previous Coating							
New		Painted		AG		Fleck	Other

Type of Finish Required			
Matt		Eggshell	Anti-Graffiti
Colour(s) Required			Anti-Microbial

Is the Project			
Hospital		Care Home	Education

Total Area to Protect	
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