

# Structural Roof Panel System



## INSTALLATION CHECKLIST

Design Reference .....

Plot Number .....

Site Address .....

Ref	Item	Yes (✓)	No (✓)	Inspected (Initials & Date)
1	Check that the support walls are positioned to give correct span dimension. Ensure that spandrel panels are installed vertically.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Confirm that wallplates have been bedded in a suitable mortar mix along their entire length such that both wallplates are level and at the correct height.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Check that eaves wallplate strapping has been fixed, where specified (both corner and verticals).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Check that the roof panels are adequately identified to ensure that each is correctly positioned.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Check that the roof panels have been secured to spandrels in accordance with smartroof® drawing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Check that the spandrel securing straps have been located and fixed in accordance with smartroof® drawing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Check that window panels are correctly positioned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Check that panels have been screwed together and that framing anchors have been attached to all of the front and rear dummy rafter ends in accordance with the Fixings Schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Confirm that the rectangular section Rockwool insulation has been fitted at the roof apex, prior to covering with breather membrane.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Check when roof tiling will be fitted and the event that there may be some delay, ensure that roof panel joints are externally taped to exclude any possibility of moisture ingress.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Comments:**

**THIS INSTALLATION CHECKLIST SHOULD BE COMPLETED AND SIGNED FOR EACH AND EVERY PLOT**

**Signature** .....  
(Site Manager/Supervisor)

**Date**.....

Form Ref. No:	SR01-01
Issue:	4
Date:	24/04/07
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