



Mid-West Planning District

Box 96, Miniota, Manitoba R0M 1M0

Ph. 204-567-3699 | E-mail: devofficer@midwestplanning.ca

Spray-applied Polyurethane Foam Insulation Request

Compiling this information will assist in completing your application.

Contact Information

Applicant Name(s) _____

Company Name _____ Contact Name _____

Mailing Address _____ Town/City _____ Postal Code _____

Phone Number _____ Email Address _____

Land Owner _____ Same as applicant

Mailing Address _____ Town/City _____ Postal Code _____

Phone Number _____ Email Address _____

Location Information

Oakview Hamiota Prairie View Ellice-Archie

Urban: Lot _____ Block _____ Plan _____ Building Number _____ Street _____ Town _____

Rural: NW SW NE SE Section _____ Township _____ Range _____

Roll Number: _____

Spray Foam Information

Manufacturer of Spray-applied Polyurethane Foam Insulation (SPF): _____

Approved under CCMC#: _____ for Insulation Air Barrier Vapour Barrier

Type of Insulation: Open Cell Closed Cell Color of SPF: _____

Confirm Water Vapour Permeance of the SPF Insulation is less than or equal to 60 ng/Pa.s.m2 when tested in conformance with ASTM E 96 where SPF Insulation is to be used as the vapour barrier. Yes No

Specify minimum thickness required for the product to attain this Water Vapour Permeance rating: _____ inches

Documentation submitted? Yes No (Documentation may be required)

Foamed plastics must be protected with a thermal barrier such as drywall or interior finish as defined by subsections 9.29.4 to 9.29.9 or have been tested in accordance with CAN4-S124-M and meet the requirements of classification B.

Spray Foam Application Information

Specify the thermal barrier that will be provided: _____
(Information on thermal barrier may be required to be submitted)

Plans/Details/Specifications reviewed and sealed by Professional: Yes No

Spray-applied Polyurethane Foam Insulation to be applied to: (Location, Thickness)

Attic: _____

Mid-West Planning District

Basement Walls: _____

Crawl Space walls: _____

Floors: _____

Rim Joist: _____

Other: _____

Specify method of venting roof space if applicable: _____

Installer Information

Licensed Contractor: _____ **ID#:** _____

Certified Installer: _____ **ID#:** _____

It is the contractor's responsibility to ensure a label is placed on the job site as required by CAN/ULC-S705.2 including the above information and stating: "This certificate indicates that the installed spray-applied rigid polyurethane foam insulation meets the CAN/ULC-S705.1 – medium density – product standard. This product has been installed according to the CAN/ULC-S705.2 installation standard."

This form is to be completed and returned to the Mid-West Planning District office.

Signature of Applicant

Date

MWPD2021