

A. 9632 Cliff View

INSTALLATION CARD

JOB ADDRESS:

9632 Cliff View
18573
Style 80

MAGNAWALL 1-KOTE
REINFORCED STUCCO SYSTEM

1-KOTE STUCCO PRODUCTS

ICBO Evaluation Service, Inc. Report No.

Date of Job Completion:

PLASTERING CONTRACTOR:

Name: R.R. BUILDING MATERIALS

Address: 5959 S. WILLOW

Approved Contractor Number as issued by
the Plastering Manufacturing

Phone: 702-745-7535

This is to certify that the plastering system on the building exterior at the above address has been installed in accordance with
the evaluation report specified above and the manufacturer's instructions.

Signature of authorized representative of plastering contractor

Date

INSTALLATION CARD

JOB ADDRESS:

MAGNAWALL 1-KOTE REINFORCED STUCCO SYSTEM

1-KOTE STUCCO PRODUCTS

ICBO Evaluation Service, Inc. Report No.**Date of Job Completion:**

PLASTERING CONTRACTOR:

Name: P.R. BUILDING MATERIALS

Address: 5959 S. UNIV UPRW

Approved Contractor Number as Issued by
the Plastering Manufacturing _____

Phone: (702) 265-7535

This is to certify that the plastering system on the building exterior at the above address has been installed in accordance with the evaluation report specified above and the manufacturer's instructions.

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Date _____