Stucco Certificate

Installation Card

Job Address:	Subdivision and Lot #:
Building Permit #:	Date of Completion:
<u> </u>	
Stucco or Plastering Contractor:	
Name:	
Address:	
Phone #:	
Approved contractor License Nur plastering products: *	mber as issued by stucco /
	(required information)
Stucco or Plastering System Used:	
This is to certify that the plastering sys above address has been installed in accespecified above and the manufacturer'	cordance with the evaluation report
Signature of authorized representative of plastering co	ontractor Date

Installation card must be presented to the building inspector after completion of work and before or at the final inspection.