

**Owner** \_\_\_\_\_ **Unit** \_\_\_\_\_

**Sound Underlayment Material Approval**

\_\_\_\_\_ has been approved as the sound underlayment for installation, to be installed per the Florencia Flooring Specifications attached (see Flooring Specifications, Page 1).

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager

**Installation Approval**

Approval has been granted to install \_\_\_\_\_ over the Sound Isolation Barrier in accordance with the Florencia Flooring Specifications attached (See Flooring Specifications, Page 1). Caulking has been installed as per Flooring Specifications, Page 1.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager

**Parameter Approval**

Parameter Isolation barrier caulk has been installed. Final approval has been given. Type Used: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager

**Balcony Flooring Approval**

Approval has been granted for installation of \_\_\_\_\_ on the balcony. Instructions and specifications have been given to flooring company.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Manager