

DATE: 4/05/2021

INVITATION TO BID  
THIS IS NOT AN ORDER

Page: 5

BID NO.: 50-00134161

## JEFFERSON PARISH

PURCHASING DEPARTMENT  
P.O. BOX 9  
GRETNA, LA. 70054-0009  
504-364-2678

VENDOR:

BUYER: MBUTTERY

As per LSA-RS 47:301 et seq., all governmental bodies are excluded from payment of sales taxes to any Louisiana taxing body. Quotations shall be based on F.O.B. Agency warehouse or jobsite, anywhere within the Parish as designated by the Purchasing Department.

JEFFERSON PARISH reserves the right to cancel all or any part of an order if not shipped promptly. No charges will be allowed for parking or cartage unless specified in quotation. The order must not be filled at a higher price than quoted. JEFFERSON PARISH reserves the right to cancel at any time and for any reason by issuing a THIRTY (30) day written notice to the contractor.

JEFFERSON PARISH is expecting all products to be new and all work to be done in workman-like manner, according to standard practices. Any deviations or alteration from the specifications must be indicated on the bid form for each item and upon request, product data for same must be submitted by the time specified by the Purchasing Department.

## DELIVERY: FOB JEFFERSON PARISH

INDICATE DELIVERY DATE ON EQUIPMENT AND SUPPLIES

10 days

INDICATE STARTING TIME (IN DAYS) FOR CONSTRUCTION WORK

10 days

INDICATE COMPLETION TIME (IN DAYS) FOR CONSTRUCTION WORK

35 days

In the event that addenda are issued with this bid, bidders MUST acknowledge all addenda on the bid form. Bidder must acknowledge receipt of an addendum on the bid form by placing the addendum number as indicated. Failure to acknowledge any addendum on the bid form will result in bid rejection.

Acknowledge Receipt of Addenda: NUMBER: N/A

NUMBER: \_\_\_\_\_

NUMBER: \_\_\_\_\_

NUMBER: \_\_\_\_\_

LOUISIANA CONTRACTOR'S LICENSE NO.: (if applicable) 18364

## \*\*\* ALL BIDDERS MUST COMPLETE SECTION BELOW \*\*\*

FIRM NAME:

Advance Waterproofing Co., Inc.

SIGNATURE:

(Must be signed here) Greg Kempton

TITLE:

President

PRINT OR TYPE NAME:

Greg Kempton

ADDRESS:

710 Milton Street

CITY, STATE:

Gretna, LA

ZIP:

70053

TELEPHONE:

504-362-1843

FAX:

504-365-0055Email: advancewaterproofingco@gmail.comTOTAL PRICE OF ALL BID ITEMS: \$ 34,600.00

DATE: 4/05/2021

Page: 6

## INVITATION TO BID FROM JEFFERSON PARISH - continued

BID NO.: 50-00134161

SEALED BID

ITEM NUMBER	QUANTITY	U/M	DESCRIPTION OF ARTICLES	UNIT PRICE QUOTED	TOTALS
1	1.00	JOB	<p>LABOR, MATERIALS AND EQUIPMENT NECESSARY TO PRESSURE WASH AND WATERPROOF THE EXTERIOR OF THE PARKING GARAGE FOR THE DEPARTMENT OF GENERAL SERVICES</p> <p>0010 - PRESSURE WASH, CLEAN &amp; WATERPROOF EXTERIOR OF PARKING GARAGE DEPARTMENT OF GENERAL SERVICES</p> <p>PROVIDE ALL LABOR, MATERIALS, DELIVERY, EQUIPMENT AND ALL OTHER INCIDENTALS NECESSARY TO PRESSURE WASH, CLEAN AND SEAL/WATERPROOF THE EXTERIOR OF THE PARKING GARAGE PER THE ATTACHED SPECIFICATIONS AT THE FOLLOWING LOCATION:</p> <p>PARKING GARAGE 300 DERBIGNY STREET GRETNA, LA 70053</p> <p>***** PLEASE SEND ALL QUESTIONS AND EMAILS TO STEPHANIE BUSH AT SABUSH@JEFFPARISH.NET *****</p>	<del>34,600.00</del> \$34,600.00	<del>34,600.00</del> \$34,600.00



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/3/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Terrebonne Insurance Agency, Inc. 210 Mystic Blvd Houma LA 70360		<b>CONTACT NAME:</b> Chris Breaux <b>PHONE (A/C, No, Ext):</b> (985) 851-3080 <b>FAX (A/C, No):</b> (985) 851-0304 <b>E-MAIL ADDRESS:</b> chris@terrebonneinsurance.com	
<b>INSURED</b> Advance Waterproofing, Inc. P. O. Box 1188 Gretna LA 70054		<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Kinsale Insurance Company INSURER B: LWCC INSURER C: INSURER D: INSURER E: INSURER F:	

**COVERAGES**

CERTIFICATE NUMBER: CL213339227

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	X	Y	0100081725-2	2/28/2021	2/28/2022	EACH OCCURRENCE \$ 1,000,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000	
							MED EXP (Any one person) \$ excluded	
							PERSONAL & ADV INJURY \$ 1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						GENERAL AGGREGATE \$ 2,000,000	
							PRODUCTS - COMP/OP AGG \$ 2,000,000	
							\$	
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$	
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$	
	<input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$	
	<input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident) \$	
							\$	
A	<input checked="" type="checkbox"/> UMBRELLA LIAB	X	Y	0100081728-2	2/28/2021	2/28/2022	EACH OCCURRENCE \$ 2,000,000	
	<input type="checkbox"/> EXCESS LIAB						AGGREGATE \$ 2,000,000	
	<input type="checkbox"/> CLAIMS-MADE						\$	
	DED <input type="checkbox"/> RETENTION \$						\$	
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	N/A	Y	155108	3/1/2021	3/1/2022	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
								E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Contractor that does waterproofing work.

Coverage includes blanket waiver and blanket additional insured as required by written contract along with hired and nonowned auto coverage on General Liability and Umbrella policies.

Waiver of Subrogation in favor of certificate holder as required by written contract in regards to workers compensation policy.

**CERTIFICATE HOLDER**

The Parish of Jefferson, its Districts, Departments and Agencies under the direction of the Parish President and the Parish Council  
Department of General Services  
200 La Brea St, Suite 300  
New Orleans, LA 70112

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE




# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/16/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b>  State Farm Insurance Co 1750 Stumpf Blvd Gretna, LA 70056	<b>CONTACT NAME:</b> Cliff Robicheaux		
	<b>PHONE (A/C, No, Ext):</b> 504-263-1959	<b>FAX (A/C, No):</b> 504-263-1875	
<b>INSURED</b>  Advance Waterproofing Co, Inc PO Box 1188 Gretna, LA 70054-1188	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
	<b>INSURER A:</b> State Farm Mutual Automobile Insurance Company		25178
	<b>INSURER B:</b>		
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		
	<b>INSURER E:</b>		
	<b>INSURER F:</b>		

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ OTHER \$
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			199 3727-D30-18E	10/30/2020	04/30/2021	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 1,000,000 BODILY INJURY (Per accident) \$ 1,000,000 PROPERTY DAMAGE (Per accident) \$ 1,000,000 OTHER \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED \$ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ OTHER \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

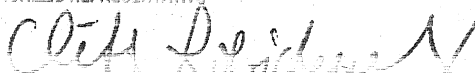
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

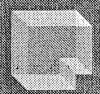
**CERTIFICATE HOLDER****CANCELLATION**

The Par of Jeff, its Dist, Depts & Agencies Under the Dir of  
the Par Pres & the Par Council Dept of Gen Services  
2000 Derbigny St Ste 3300  
Gretna, LA 70056

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE





PROSOCO®

# Sure Klean® Weather Seal

PROTECTIVE TREATMENTS

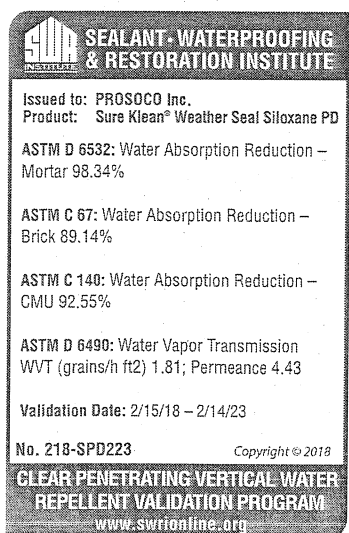
## Siloxane PD

Sure Klean® Weather Seal Siloxane PD (predilute) is a ready-to-use, water-based silane/siloxane water repellent for concrete and most masonry and stucco surfaces. Siloxane PD will not impair the natural breathing characteristics of treated surfaces. It helps masonry resist cracking, spalling, staining and other damage related to water intrusion. Low odor and alkaline stable, Siloxane PD is ideal for field and in-plant application.

### SAFETY INFORMATION

Always read full label and SDS for precautionary instructions before use. Use appropriate safety equipment and job site controls during application and handling.

24-Hour Emergency Information:  
INFOTRAC at 800-535-5053



**NOTE:** The SWR Institute Validation Program uses standardized testing for validation purposes, including testing on CMU. PROSOCO does not recommend the use of Siloxane PD on CMU. Please reference the Substrate Chart on page 2.

### ADVANTAGES

- Penetrates deeply for long-lasting protection on vertical or horizontal surfaces.
- Service life is estimated at more than 10 years.
- Treated surfaces “breathe” – does not trap moisture.
- Water-based formula minimizes explosion and fire hazards compared to solvent-based water repellents.
- Appropriate for use on manufactured stone surfaces.
- Easy cleanup with Enviro Klean® 2010 All Surface Cleaner.
- Low odor for safer application to occupied buildings.
- Alkaline stable – suitable for new “green” concrete, 14–28 days old.
- Ready-to-use. No on-site dilution required.

### Limitations

- Will not keep water out of cracks, defects or open joints.
- Not recommended for below-grade application.
- Not suitable for application to synthetic resin paints, gypsum, or other non masonry surfaces.

### REGULATORY COMPLIANCE

#### VOC Compliance

Sure Klean® Weather Seal Siloxane PD is compliant with the US Environmental Protection Agency’s AIM VOC regulations. Visit [www.prosoco.com/voccompliance](http://www.prosoco.com/voccompliance) to confirm compliance with individual district or state regulations.

# Product Data Sheet

## Weather Seal Siloxane PD

### TYPICAL TECHNICAL DATA

<b>FORM</b>	Cloudy white liquid, odorless
<b>SPECIFIC GRAVITY</b>	0.996
<b>pH</b>	4-5
<b>WT/GAL</b>	8.29 lbs
<b>ACTIVE CONTENT</b>	7%
<b>TOTAL SOLIDS</b>	4% ASTM D 5095
<b>VOC CONTENT</b>	<30 g/L Low Solids Coating
<b>FLASH POINT</b>	>212° F (>100° C) ASTM D 3278
<b>FREEZE POINT</b>	32° F (0° C)
<b>SHELF LIFE</b>	1 year in tightly sealed, unopened container

### PREPARATION

Protect people, vehicles, property, plants, windows and all non masonry surfaces from product, splash, residue, fumes and wind drift. Protect and/or divert foot and auto traffic.

Thoroughly clean the surface using the appropriate PROSOCO product. Clean newly constructed and repointed surfaces before application. Sealing and caulking compounds should be in place and cured.

Though Siloxane PD may be applied to slightly damp surfaces, best performance is achieved on clean, visibly dry and absorbent surfaces. Excessive moisture inhibits penetration, reducing the service life and performance of the treatment.

The top of walls need to be capped and made watertight prior to application.

### Window Glass Protection

Protect window glass before use. Sure Klean® Strippable Masking is effective protection for use with this product. If protecting windows is impractical, follow these steps:

1. Clean window glass thoroughly before application to nearby concrete or masonry.
2. Don't use in wind or when air or surface temperatures are hotter than 95°F (35°C).
3. Try to keep Siloxane PD off the glass.
4. After treated surfaces have been protected from water for 6 hours, if product is on window glass, clean as soon as possible with soap and warm water. Alternatively use Sure Klean® 9010 All Surface Cleaner to remove dried residues within 6 hours.

### Surface and Air Temperatures

Best surface and air temperatures are 40-95°F (4-35°C) during use and for 8 hours after. If freezing conditions exist before application, let masonry thaw. The water carrier may freeze at low temperatures or evaporate in high temperatures. Both conditions impair penetration and results. Cleanup is more difficult from surfaces hotter than 95°F (35°C).

### Equipment

Recommended application is by high volume, low-pressure (<50 psi) spray. Fan spray tips are recommended to avoid atomization. Do not atomize/vaporize the material.

For small scale application, or when spray application is not appropriate, product may be applied using brush or roller. Contact Customer Care or your local PROSOCO representative for more information.

Recommended for these substrates. Always test. Coverage is in sq.ft./m. per gallon.

Substrate	Type	Use?	Coverage
Architectural Concrete Block*	Burnished	no	N/A
	Smooth	no	
	Split-faced	no	
	Ribbed	no	
Concrete	Brick*	yes	150-200 sq.ft. 14-19 sq.m.
	Tile	yes	
	Precast Panels♦	yes	
	Pavers	yes	
	Cast-in-place♦	yes	
Fired Clay	Brick	yes	50-175 sq.ft. 5-16 sq.m.
	Tile	yes	
	Terra Cotta (unglazed)	yes	
	Pavers	yes	
Marble, Travertine, Limestone	Polished	no	N/A
	Unpolished	no	N/A
Granite	Polished	no	N/A
	Unpolished*	no	N/A
Sandstone	Unpolished	yes	75-125 sq.ft. 7-12 sq.m.
Slate	Unpolished*	no	N/A

\*Weather Seal Blok-Guard® & Graffiti Control is a more appropriate product.

♦See specific application instructions for dense surfaces.

\*PROSOCO SLX100 or SL100 may be a more appropriate product.

Always test to ensure desired results.

# Product Data Sheet

## Weather Seal Siloxane PD

### Storage and Handling

Store in a cool, dry place. Always seal container after dispensing. Do not alter or mix with other chemicals. Published shelf life assumes upright storage of factory-sealed containers in a dry place. Maintain temperature of 45–100°F (7–38°C). Do not double stack pallets. Dispose of unused product and container in accordance with local, state and federal regulations.

### APPLICATION

Read "Preparation" and the Safety Data Sheet before use. **ALWAYS TEST** a small area of each surface to confirm suitability, coverage rates and desired results before starting overall application. Include in the test area any previous repairs and patches, including aesthetic cementitious finishes. Different surface compositions may result in absorption and/or appearance differences. Test with the same equipment, recommended surface preparation and application procedures planned for general application.

### Dilution & Mixing

Apply as packaged. Do not dilute or alter.

### Vertical Application Instructions

*For best results, apply "wet-on-wet" to a visibly dry and absorbent surface.*

**Sprayer:** Saturate from the bottom up, creating a 4–8 inch (15–20 cm) rundown below the spray contact point. Let the first application penetrate for 5–10 minutes. Re-saturate. Less will be needed for the second application.

### Brush or Roller

*Recommended for small scale application or when spray application is not appropriate. Contact PROSOCO for more information.* Saturate uniformly. Let penetrate for 5–10 minutes. Brush out heavy runs and drips that don't penetrate.

### Horizontal Application Instructions

Saturate in a single application. Use enough to keep the surface wet for 2–3 minutes before penetration. Broom out puddles until they soak in.

### Dense Surface Application Instructions

Apply a single coat. Use enough to completely wet the surface without creating drips, puddles or rundown. Do not over apply. Test for application rate.

### Drying Time

Treated surfaces dry to touch in 1 hour. Protect surfaces from rainfall for 6 hours following treatment. Protect from foot and vehicle traffic until visibly dry. Siloxane PD gains its water-repellency properties in 72 hours.

### Cleanup

Clean tools, equipment, and over spray with soap and warm water.

### Paint Adhesion

Always test to make sure paint sticks to treated surfaces. Improve adhesion before painting by pressure water-rinsing the treated surface, then letting it dry.

Some cementitious coatings, plaster, stucco, etc. may not adhere well to treated surfaces. Install them first and let them thoroughly cure before application. Always test to verify compatibility between Siloxane PD and other proposed surface treatments.

### BEST PRACTICES

Surface should be clean, dry and absorbent before application. Clean soiled surfaces with the appropriate Sure Klean® or Enviro Klean® cleaner before application. Call Customer Care toll-free at 800-255-4255 for recommendations.

Recommended application for PROSOCO protective treatments is high volume, low-pressure (<50 psi) spray equipment with a fan-type spray tip and adjustable pressure to avoid atomization of the material. For small scale application, or when spray application is not appropriate, brushes or roller may be used. Contact Customer Care or your local

representative for more information on brush/roller application.

Protect treated surfaces from rain for 6 hours following treatment.

**ALWAYS TEST** for best coverage rates and to confirm results before overall application. Test using the application instructions included herein. Let the test area dry thoroughly before inspection.

Never go it alone. If you have problems or questions, contact your local PROSOCO distributor or field representative. Or call PROSOCO technical Customer Care, toll-free at 800-255-4255.



## Product Data Sheet

### Weather Seal Siloxane PD

#### WARRANTY

The information and recommendations made are based on our own research and the research of others, and are believed to be accurate. However, no guarantee of their accuracy is made because we cannot cover every possible application of our products, nor anticipate every variation encountered in masonry surfaces, job conditions and methods used. The purchasers shall make their own tests to determine the suitability of such products for a particular purpose.

PROSOCO, Inc. warrants this product to be free from defects. **Where permitted by law, PROSOCO makes no other warranties with respect to this product, express or implied, including without limitation the implied warranties of merchantability or fitness for particular purpose.** The purchaser shall be responsible to make his own tests to determine the suitability of this product for his particular purpose. PROSOCO's liability shall be limited in all events to supplying sufficient product to re-treat the specific areas to which defective

product has been applied. Acceptance and use of this product absolves PROSOCO from any other liability, from whatever source, including liability for incidental, consequential or resultant damages whether due to breach of warranty, negligence or strict liability. This warranty may not be modified or extended by representatives of PROSOCO, its distributors or dealers.

#### CUSTOMER CARE

Factory personnel are available for product, environment and job-safety assistance with no obligation. Call 800-255-4255 and ask for Customer Care – technical support.

Factory-trained representatives are established in principal cities throughout the continental United States. Call Customer Care at 800-255-4255, or visit our web site at [www.prosoco.com](http://www.prosoco.com), for the name of the PROSOCO representative in your area.