## Checklist for Stormwater Management Roof

Please fill out a separate check list for each roof area and send them back to engineering@zinco-greenroof.com

Project name:													
Street, house number:													
Postal code, city:													
Roof area*:													
Planner:													
Contact person:													
Street, house number:													
Postal code, city:													
Phone number:													
Requirements:	Roof surface without inclination	and with a sufficient load	l bearing capacity										
Maximum admissible la	oad	kN/m² (traffic load and snow load not included)											
Roof construction	☐ roof without insulation	☐ insulated roof	☐ inverted roof										
Roof surfaces:	Please state the runoff coefficient (C) if it needs to be considered in the calculation!												
Total area (outer edge)	m²	Available retention area**	m²										
Green area extensive	m <sup>2</sup> C=	Green area intensive	m <sup>2</sup> C=										
Planned system build-up	□ Sedum Carpet		☐ Heather with Lavender										
	☐ Rockery Type Plants		☐ Roof Garden										
	☐ Other		☐ Other										
Drainage element	□ Other	Drainage element	☐ Other										
Drainage element Substrate depth		Drainage element Substrate depth	□ Othermm										
-		Ç											

<sup>\*</sup> Please number the single areas and indicate them in the overview plan

<sup>\*\*</sup> Total area minus roof upstand, skylights, and any further areas which do not allow for retention

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Roof outlet	's:			□ roof outlets with foamed connecting flange □ roof outlets with screw-in flange □ roof outlets through the upstand																
Amount of		pieces						Diameter				mm								
Max. disch	arge r	ate		l/s				Limitation on discharge					l/s							
Further information:																				
Retention volume				m <sup>3</sup>				n <sup>3</sup>	Duration of discharge					h						
Retention h	neight		•••	cm																
Type of thr	ottle			☐ ZinCo						☐ Other										
Which type of rain event is to be taken into consideration?																				
Annuality:	Annuality:																			
Minutes:																				
D [min/-h]	5	10	15	20	30	45	60	90	2 h	3 h	4 h	6 h	9 h	12 h	18 h	24 h	48 h	72 h		
rN [l/s*ha]																				
Note:  Please provide top view plans in DWG- (or DXF-) format if available, alternatively PDF-documents with reference dimensions.																				
Further comments or requests:																				
											•••									