Laboratory Report

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Folder # 1408681 **Project #** 4786337200		**Supplier**	UL- Northbrook
Report Date: 7/23/14		**Client Reference**	N/A
UL-Northbrook Attn: Janet Burton 333 Pfingsten Rd. Northbrook, IL 60062		**Inventory ID**	428990
		Client Sample ID	#1850090-6 4"x4" Coated Plaques File# SV29777
		Lot #	N/A
		UPC	N/A

Test	Method	Results
Microbiological		
Mold Growth & Humidity Test Overall	UL 181	Pass
Evidence of Joint Opening or Separation	UL 181	No
Evidence of Deformation or Delamination	UL 181	No
Significant Mold Growth	UL 181	No
Spread of Mold Beyond Inoculated Area	UL 181	No

Scott Faria

Digitally signed by Scott Faria
DN: cn=Scott Faria, o=UL, ou=UL, email=scott.faria@ul.com, c=US
Date: 2014.07.23 08:58:10 -04'00'

Scott Faria
Client Service Specialist

Project No. 4786337200
LABORATORY DATA PACKAGE

File ~~XXXX~~ SV29777

Number of pages in this package 6 [including additional pages 6]
(Fill in when using printed copy as record)

CLIENT INFORMATION	
Company Name	MONOXIVENT/UNDERDUCT-CORROSION COMPOSITES
Address	1306 Mill St Rock Island, IL 61201 United States

AUDIT INFORMATION:

Description of Tests | Per Standard No. UL 181 | Edition/ Revision Date 10th 11th

[X] Tests Conducted by + — Silvany Soares (Printed Name) — Signature

[ ] UL Staff conducting or witnessing testing (WTDP, TMP, WMT only)
[ ] UL Staff supervising UL Staff in training
[ ] Authorized Signatory (CTDP, TPTDP, TCP, PPP, SMT)
Printed Name | Signature. Include date for CTDP, TPTDP, TCP, PPP, WMT, TMP, SMT

Reviewed and accepted by qualified Project Handler (LAB ASSISTANT MANAGER) — Janet Burton / DOMITILA BONATO (Printed Name) — Janet Burton (Signature)

TESTS TO BE CONDUCTED:

Test No.	Done +++	Test Name	[ ] Comments/Parameters [ ] Tests Conducted by ++
1	5/22/14 (A)	MOLD GROWTH AND HUMIDITY TEST	

Instructions -
+ - When all tests are conducted by one person, printed name and signature can be inserted here instead of including printed name and signature on each page containing data. Must indicate number of pages in the data package.
++ - When test conducted by more than one person, printed name and signature of person conducting the test can be inserted next to the test name instead of including printed name and signature on each page containing data. Test dates may be recorded here instead of entering test dates on the individual datasheet pages. Must indicate number of pages in the data package.
+++ - Use of this field is optional and may be employed differently. If used to include a date instead of entering the testing date on the individual datasheet pages, the date shall be the date the test was conducted.

Description of Tests | Per Standard No. UL 181 | Edition/ Revision Date

Form Issued: 2004-01-23
Form Revised: 2013-09-09

(A) Supervised by HC, 5/22/14 HC

SV29777

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Tested by: Silvana Soares Printed Name Signature Date 5/22/14

TEST LOCATION: (To be completed by Staff Conducting the Testing)
[X] UL or Affiliate [ ]WTDP [ ]CTDP [ ]TPTDP [ ]TCP [ ]PPP [ ]WMT [ ]TMP [ ]SMT
Company Name: UL Verification Services
Address: 85 John Road, Canton MA 02021

TEST EQUIPMENT INFORMATION

[ ] UL test equipment information is recorded on Meter Use in UL's Laboratory Project Management (LPM) database.

[ ] UL test equipment information is recorded on <<insert location and local laboratory equipment system identification.>> US VS Canton Equipment Calibration List.

Inst. ID No.	Instrument Type	Test Number +, Test Title or Conditioning	Function /Range	Last Cal. Date	Next Cal. Date
SHL 2023	Incubator	Incubation	25+/-1°C	8/10/13	8/10/18
SHL2112	RH probe	Condition of test	0-100% RH		06/13/15
SH0067	BSC	BioSafety Cabinet	N/A	7/12/2013	7/12/2014

+ - If Test Number is used, the Test Number must be identified on the data sheet pages or on the Data Sheet Package cover page.

The following additional information is required when using client's or rented equipment, or when a UL ID Number for an instrument number is not used. The Inst. ID No. below corresponds to the Inst. ID No. above.

Inst. ID No.	Make/Model/Serial Number/Asset No.

Form Issued: 2004-01-23
Form Revised: 2013-09-09

Tested by: Silvany Soares (Printed Name) (Signature) Date 5/22/14

TEST SAMPLE IDENTIFICATION:

The table below is provided to establish correlation of sample numbers to specific product related information. Refer to this table when a test identifies a test sample by "Sample No." only.

Sample Card No.	Date Received	[] Test No.+	Sample No.	Manufacturer, Product Identification and Ratings
1850090	04-04-14			Polymeric compound from Underground duct Product

+ - If Test Number is used, the Test Number or Numbers the sample was used in must be identified on the data sheet pages or on the Data Sheet Package cover page.

[] Sampling Procedure -

[] This document contains data using color and if printed, should be printed in color to retain legibility and the information represented by the color.

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Tested by: Silvany Soares Printed Name Signature Date 5/22/14

MOLD GROWTH AND HUMIDITY TEST

UL181, Eleventh Edition

SAMPLES

Samples designated Underground duct Product were selected in a 4 in. by 4 in. ID for this test.

METHOD

In accordance with UL181, Eleventh Edition, paragraphs 13.1 through 13.4.

Three samples representing typical wall areas of the assembled air ducts or air connectors are to be prepared. Each sample is to be approximately 4 by 4 in. (102 by 102 mm) square and is to include any joining material employed in the installation of duct systems.

Mold mycelia and spores from Chaetomium Globosium are to be applied to the samples. The samples are to be placed in a closed vessel in which an atmosphere saturated with water vapor is maintained at room temperature and under dark conditions. The samples are to remain in this atmosphere until the extent of growth has been demonstrated or until the mold and spores have disintegrated, but not less than 60 days.

RESULTS

1. Was there any evidence of the spread of the mold beyond the inoculated area? [Yes] (No)
2. Was there a significant growth of mold? [Yes] (No)
3. Did any of the tapes, casings, linings become deformed or de-elaminated? [Yes] (No)
4. Did the joints show evidence of openings or separation? [Yes] (No)

Comments:

(Pass) [Fail]