

DIVISION 09 – FINISHES

09 68 00 CARPETING

PART 1 - DESIGN INFORMATION

1.01 GENERAL INFORMATION

- A. For maintenance reasons, WSU requires the use of carpet to be kept to a minimum. Carpet is not acceptable in high traffic areas, areas where student and general public may carry food or drink, public corridors, vestibules, or elevators.
- B. Prior to designing carpet into a project, the Consultant shall obtain specific approval from the Project Manager regarding proposed carpet locations and the intended use of these spaces.
- C. When considering carpet, multi-colored (dark color range) is preferable over solid colored carpet.
- D. Carpet tile only to be specified. Exceptions will be evaluated on a case by case basis.

1.02 WASHINGTON STATE UNIVERSITY CARPET POLICY

- A. All client requests for carpet in a new or remodel work shall be submitted to WSU Facilities Services on the Carpet Request Form located at the end of this section.

1.03 SPECIFICATIONS

- A. Standard Performance Modular Carpet Tile Minimum Requirements. For moderate to heavy traffic areas and spaces subject to multiple wet cleanings such as commercial office, conference rooms and administrative spaces.
 - 1. Warranty: A minimum of non-prorated, 15 year warranty covering labor and material against the following: static charge, dimensional stability, edge ravel ASTM D7267, delamination ASTM D3936, tuft bind ASTM D1335, adhesion to subfloor.
 - 2. Carpet Removal and Reclamation to be considered
 - 3. Sustainability: NSF 140-2007 Gold
 - 4. Indoor Air Quality (Includes Adhesives): CRI Green Label Plus
 - 5. Static Charge: ≤ 3.5 KV; in accordance with AATCC 134
 - 6. Flammability: Passes DOC-FF-1-70 Pill Test
 - 7. Radiant Panel Test: Meets NFPA Class 1; when tested per ASTM E-648 glue down
 - 8. Smoke Density: NBS Smoke Chamber NFPA-258- Less than 450 flaming mode

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9. Dimensional Stability: Passes AACHEN Test
 10. Appearance Retention- CRI ARR \geq 3.0
 11. Average Density: \geq 5000
 12. Construction: Tufted; 100% synthetic
 13. Surface texture: Cut, loop or cut and loop
 14. Dye Method: Solution, yarn or a blend thereof
 15. Yarn Type: 100% Nylon, Type 6 or 6.6
- B. Carpet Adhesives
1. Select carpet adhesives in accordance with the manufacturer's recommendations and warranty requirements. Should be low in odor, non-water soluble, releasable adhesive.
- C. Overrun: Provide 5% overrun calculated on yardage of carpet required for EACH color. Overrun material should be produced with same dye lots as original carpet scheduled for installation.

PART 2 - PRODUCTS (NOT USED)

PART 3 - EXECUTION (NOT USED)

END OF SECTION

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CARPET REQUEST FORM

All requests for purchase and installation of carpeting received from University departments or other units shall include the information and justification requested below and approval signatures from the following:

1. Department authorized signature.
2. Department of Facilities Services Custodial Services Director or authorized representative.
3. Department of Facilities Services Assistant Vice President for Operations or authorized representative.

Project:		Project Number:	
Building:		Building Number:	
A/E Contact:		Fax:	

Carpet Location

Dept. Contact :		Phone:		Email:	
Fax:		Zip:		Room #'s:	

Conditions

The Department or unit requesting carpeting must agree to the following conditions:

1. Department will replace chair casters with type suitable for flooring material.
2. Purchase for Facilities Services any additional cleaning or maintenance equipment needed for routine maintenance of the carpet.
3. Reimburse Facilities Services for any and all non-routine cleaning and maintenance costs such as annual shampooing, major spillage or vandalism.
4. Replacement carpet will be purchased from the department's operating budget when Facilities Services deems it necessary to replace original carpet. The purchase order of the replacement carpet must bear the signature of the department chair, director, dean or the appropriate supervising official prior to purchase.

Facilities Information

Department or unit requesting carpet information

Provide each type of area where carpet is being requested with the corresponding room number. Attach an R-Sheet or floor plan and indicate the area requested for new carpet or replacement. Note the function of the room or whether or not the function of the room will change as a result of the carpet being installed. Write a brief justification indicating why these spaces need to be carpeted.

Room No.	Description of Space

Department Authorized Signature:

Approving the above information is correct, agreeing to the above conditions and authorizing funding.

Funding Code for Annual and Non-routine Cleaning:

Facilities Services Custodial Services Director Approval Signature:

Facilities Services Assistant Vice President for Operations Signature: