

# Gypsum Overspray

PRIMER

## PRODUCT DESCRIPTION

Maxxon® Commercial Gypsum Overspray is used as a primer over Maxxon Underlayments before the installation of glue down finished floor goods\*.

\*Where floor goods manufacturers require special adhesive or installation systems, their requirements supersede these recommendations.

## FEATURES & BENEFITS

- Enhances adhesive bond by reducing porosity factor to maintain proper adhesive open time
- Low odor, Low VOC

## PRODUCT INFORMATION

Property	Liquid
VOC	0.02 g/L
Shelf Life	1 Year Unopened
Packaging	1-gallon (3.8 L) 5-gallon (18.9 L) 55-gallon (208.2 L) 265-gallon (1,003 L)
Coverage per undiluted gallon	300 ft <sup>2</sup> (27.9 m <sup>2</sup> )
Coverage per diluted gallon	6:1 Mix Ratio: 2,100 ft <sup>2</sup> (195.1 m <sup>2</sup> )



**Gypsum  
Overspray**

PRIMER

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**INSTALLATION**

**Surface Preparation**

Before priming, test the underlayment for dryness. The underlayment must be fully dry before priming. Make sure substrate surface is broom cleaned, contaminant free and should have a smooth finish free from voids and sharp protrusions.

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**Tools**

- Mixing bucket
  - Measuring tool
  - 1/4" nap roller or spray tool
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**Mix Ratio**

Dilute material 6 parts water to 1 part concentrate.

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**Application**

Roll or spray Maxxon Gypsum Overspray onto the floor at a rate of 300 ft<sup>2</sup> (27.9 m<sup>2</sup>) per gallon of mix.

For best results, Gypsum Overspray is applied about 1-2 hours prior to adhesive application.

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**STORAGE AND DISPOSAL**

Keep from freezing; do not store below 40 °F (5 °C). Keep container closed when not in use. Keep in a dry, cool place.

Dispose of waste by following federal, state and local regulations. If spill occurs, clean up with potable water.

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**WARRANTY AND TECH SERVICES**

Contact Maxxon before your project for complete warranty information. Technical performance verification and service is available through Maxxon Corporation or Maxxon Regional Representative throughout North America.



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**JOB NAME:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**APPLICATOR:** \_\_\_\_\_

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