

**MAINTENANCE GUIDEBOOK V
ROOF AND WATERPROOFING MAINTENANCE
APPENDIX A - HISTORICAL ROOFING RECORD**

HISTORICAL ROOFING RECORD
(Prepare One Record for Each Roof)

BASIC ROOF INFORMATION

Name of HA: _____
Development Name/No. _____ / _____

Building Name/No. _____ / _____
Address: _____

Date Constructed: _____

Use: _____ (Permanent / Temporary)

Roof Membrane Installation: Original / Recover / Replacement
If Recover Roof, Note Original Membrane Type: _____

Date of Existing Roof Completion: _____

Roofing Contractor:

Name

Address

Telephone Number

Contractor Warranty: (Yes / No) Expiration Date: _____

Membrane Manufacturer:

Name

Address

Telephone Number

Manufacturer Warranty: (Yes / No) Expiration Date: _____

BUILDING SYSTEM INFORMATION

Structural Frame System (Wood / Steel / Concrete / Masonry)
Exterior Wall System (Siding_____/ Brick / CMU / Concrete)

Structural Roof Deck: (Wood / Concrete Slab / Concrete Plank /
Gypsum / Steel / Other_____)

Ventilation: (Yes / No) Type: _____

Roof Slope (Dead Level / Low Slope / Steep Slope) _____
(Inches/Foot; Rise/Run)

Area of Roof: Squares _____ (One square equals 100 SQ. FT.)

ROOF SYSTEM INFORMATION

Roof Surfacing: _____
Type of Roof Membrane: _____

Attachment: (Mechanically Fastened / Mopped / Ballasted)

Insulation: (Yes / No) Type: _____
Location: (Conventional / PRMA / Ceiling)
R-Value: ____ Thickness _____ No. of Layers _____
Attachment: (Mechanically Fastened/Mopped/Ballasted)

Vapor retarder: (Yes / No) Type: _____

Flashings:

Base flashings: (Metal / Composition / Other_____)
Material(s) _____ Cant strip: (Yes / No)

Counter or cap flashings: (Yes / No)
Type: (One Piece / Two Piece / Surface Mounted)

Material: _____
Reglet Joint: (Mortar/Sealant)

Through Wall: (Yes / No) Material: _____

DRAINAGE SYSTEM INFORMATION

Roof drains: _____

Scuppers: _____

Gutters: _____

Downspouts: _____

Boots on Downspouts: _____ Type: _____

MAINTENANCE AND REPAIR HISTORY

Previous Maintenance: (Describe briefly with dates.)

Roof membrane: _____

Flashings: _____

Previous Maintenance: (Describe briefly with dates.)

Roof membrane: _____

Flashings: _____

Previous Repairs (Describe briefly with dates.)

Roof membrane: _____

Flashings: _____

Previous Repairs (Describe briefly with dates.)

Roof membrane: _____

Flashings: _____

Roofing Contractor:

(completing repairs)

Name

Address

Telephone Number

Contractor Warranty: (Yes / No) Expiration Date: _____

END OF HISTORICAL ROOFING RECORD