



CITY OF SAN ANTONIO OFFICE OF HISTORIC PRESERVATION

STANDING-SEAM METAL ROOF INSPECTION FORM

ADDRESS: _____

PROPERTY OWNER NAME: _____

CONTRACTOR NAME: _____

CONTRACTOR COMPANY: _____

CONTRACTOR ADDRESS: _____

CONTRACTOR PHONE NUMBER: _____

CONTRACTOR EMAIL: _____

I, _____, acknowledge that I have obtained a Certificate of Appropriateness to install a new standing-seam metal roof with the specifications below and that any deviation will require additional review by the Historic and Design Review Commission:

- ◇ 1- **Panels** that are 18 to 21 inches in width
- ◇ 2- **Seams** are 1 to 2 inches in height
- ◇ 3- **Ridges** are to feature a double-munch or crimped ridge configuration; **no vented ridge caps or end caps are allowed.**
- ◇ 4- **Roof color** will feature a standard galvalume finish or match the existing historic roof.

CONTRACTOR SIGNATURE: _____ DATE: _____



Historic standing-seam metal roof



Do not use ridge caps with vents (left) or end caps (right).

An on-site inspection must be scheduled with OHP staff prior to the start of work to verify that the roofing material matches the approved specifications. Site inspections can be scheduled by calling (210) 207-0035 or emailing ohp@sanantonio.gov

OHP STAFF SIGNATURE: _____ DATE: _____