



Raintree villa's Owners Assoc.

# Roof Replacement Improvement Application

**\*\*Office Use Only\*\***

DATE RECEIVED: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

SAMPLES ATTACHED:

**APPLICATION FOR:**  **New**  **Existing**

**RESIDENT INFORMATION**

|                    |                   |               |               |
|--------------------|-------------------|---------------|---------------|
| <b>First Name:</b> | <b>Last Name:</b> | <b>Lot #:</b> | <b>Date:</b>  |
| <b>Address:</b>    |                   | <b>Email:</b> | <b>Phone:</b> |

**IMPROVEMENT DETAILS**

**TYPE OF ROOFING MATERIAL TO BE USED:**  
 Asphalt/fiberglass shingles     Gerard Stone-coated steel roof     Tile, slate, concrete or ceramic composition

**MANUFACTURER:** \_\_\_\_\_ **NAME OF CONTRACTOR:** \_\_\_\_\_

**COLOR OF SHINGLE:**  Brown     \_\_\_\_\_     \_\_\_\_\_  
**MANUFACTURER'S NAME OF COLOR:** \_\_\_\_\_

**PLEASE READ THE FOLLOWING REQUIREMENT FOR ALL ROOF INSTALLATIONS:** *THICKNESS of shingles must meet the manufacturer's term of 40 year warranty. Most roof shingles come with a lifetime warranty, so it is imperative to confirm the THICKNESS is a 40 year or better with the manufacturer.*

By checking this box, I understand the 40 year warranty requirement.  
 By checking this box, I understand that the valleys must be comparable to roof color.  
 By checking this box, I understand the MFG. ridge must be an enhanced ridge or a double layer single ridge installation.

**BEGINNING DATE OF IMPROVEMENT:** \_\_\_\_\_ **COMPLETION DATE:** \_\_\_\_\_  
(No earlier than date of approval) (No longer than 6 months after date of approval)

By signing below, I have given permission for the RLPOA Codes Administrator to enter my property to do the following: 1) Take a picture for the ARB Committee approval meeting 2) Inspect compliance of project after completion.

**I agree to the roof warranty requirements**  
 **I understand I am responsible for my contractor's adherence to ARB guidelines.**

**SIGNATURE OF APPLICANT**  
 \_\_\_\_\_

**\*\*\* COMMITTEE USE ONLY \*\*\***

**1<sup>st</sup> Submission:**  **APPROVED**  **DECLINED**

**ARB COMMITTEE MBR SIGNATURES:**

|            |   |            |       |
|------------|---|------------|-------|
| Name:      | <input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED | Signature: | Date: |
| Name:      | <input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED | Signature: | Date: |
| Name:      | <input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED | Signature: | Date: |
| ARB CHAIR: | <input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED | Signature: | Date: |

IF DECLINED, REASON: \_\_\_\_\_

IF EXCEPTION MADE FOR APPROVAL, REASON: \_\_\_\_\_

**2nd Submission:**  **APPROVED**  **DECLINED**

|            |   |            |       |
|------------|---|------------|-------|
| Name:      | <input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED | Signature: | Date: |
| Name:      | <input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED | Signature: | Date: |
| ARB CHAIR: | <input type="checkbox"/> APPROVED <input type="checkbox"/> DECLINED | Signature: | Date: |

**Raintree Villa's Approval**

ARB Chair Name: \_\_\_\_\_ Signature: \_\_\_\_\_