

ROOF REQUEST FOR APPROVAL
Complete and return to the Management Company

Owner name: _____ Phone: _____

Address: _____ GOM Drive Email: _____ Villa # _____

Circle one:
complete re-roof partial re-roof roof repair tile installation following remodel

If less than a complete re-roof, please indicate nature of work (i.e., repair, install skylight, cover atrium, etc.) and submit plans showing roof section to be repaired.

Approved tile: Eagle Tile, Profile: Ponderosa, Product # 5502, Name: Arcadia Canyon Brown

Expected beginning date: _____ Expected completion date: _____

I have read and agree to the requirements for roof installation and repair as outlined in the GOMHA Architectural Standards. I understand that for partial roof replacement, repair or remodels, the entire flat roof section (field) of the affected roof area will be replaced with the approved tile unless I request an exception.

Requesting an Exception? Yes ___ No ___ If yes, I have a sufficient number of the original or color-matched tiles available to complete my repair/remodel and would like an exception to install less than the full flat roof section (field). I understand that this requires an inspection of my proposed replacement tiles by a member of the Architecture Committee.

I have notified my neighbors beside and behind my villa that roofers will be working and the approximate dates and times.

Owner Signature: _____ Date _____

Roofing Company: _____

Address: _____ Phone: _____

Architecture Committee: Approved/Not approved (circle one)

By _____ Date _____

Exception requested? Yes ___ No ___

Exception approved? Yes ___ No ___

BOD Approval (if required) _____ Date _____

Please use reverse side for any additional comments.