

**Request for Re-Roofing**

To: Shipyard ARB Chairman -10 Shipyard Drive, Hilton Head Island, SC 29928

From: Owner's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**Existing Roofing:** (Check one and complete)

\_\_\_\_\_ Wood Shake/Shingles

\_\_\_\_\_ Asphalt /Fiberglass Shingles

Color \_\_\_\_\_

Other (Describe) \_\_\_\_\_

**Proposed Roofing:** (Check one and complete)

\_\_\_\_\_ Wood Shake/Shingles\*    Color, if any \_\_\_\_\_

Asphalt /Fiberglass Shingles -Minimum requirement: **300 pounds per square**

Other Materials\* \_\_\_\_\_

Manufacturer \_\_\_\_\_

Color \_\_\_\_\_

Wt.per square lbs. \_\_\_\_\_

**Roofing Contractor:**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

I have attached a sample (6"x6 " or larger) of the intended roofing material.

Submitted by: (Signature) \_\_\_\_\_

Phone No. \_\_\_\_\_