



SHIPYARD POA ARB EMERGENCY PERMIT

NAME: _____

LEGAL PROPERTY ADDRESS: _____

SHIPYARD STREET ADDRESS: _____

OWNER: _____

OWNER MAILING ADDRESS (IF DIFFERENT): _____

(Damage is less than 50% as determined by the Town of Hilton Head Island)

I, the undersigned, do hereby certify that the above referenced property has been damaged as a result of the recently declared disaster and will be repaired to the condition that existed prior to the current damage. No exterior changes will be made from the previous Shipyard Property Owners' Association ARB approved structure including architectural design, windows and doors or other finish materials and colors without written approval from the SPOA ARB.

Please include photos of the damaged structure with this form and submit a photo of the re-paired structure upon completion.

SUBMITTED BY (PLEASE PRINT): _____

**SUBMITTED BY
(SIGNATURE):** _____

DATE: _____ **PHONE NUMBER:** _____

** To submit this form, please fill out and return in person to the Shipyard Welcome Center, email any questions to membership@shipyardhhi.com **