

**RAINTREE LAKE
APPLICATION FOR IMPROVEMENT
ROOF**

DATE: _____

NAME OF APPLICANT: _____ PHONE: _____

LOCATION OF IMPROVEMENT: LOT: _____ ADDRESS: _____

ROOFING MATERIAL TO BE USED: (CHECK ONE)

- TAMKO HERITAGE "WEATHERED WOOD" COLOR: _____ HIGH SERRA "WEATHERED WOOD" COLOR: _____
- GAF TIMBERLINE-ULTRA "WEATHERED WOOD" COLOR: _____ WOOD SHINGLES: _____
- OWENS CORNING SHADOW RIDGE "DRIFTWOOD" COLOR: _____ ELK PREMIUM "WEATHERED WOOD" COLOR: _____
- MALARKEY'S LEGACY "WEATHERED WOOD" COLOR: _____ MALARKEY'S LEGACY "NATURAL WOOD" COLOR: _____
- GERARD STONE-COATED STEEL ROOF WRITE IN COLOR SELECTION FROM GUIDELINES: _____
- TILE, SLATE, CONCRETE OR CERAMIC COMPOSTION ROOFING WRITE IN COLOR SELECTION: _____

REQUIRED: 40 YEAR WARRANTY OR BETTER

ALSO EXPOSED BROWN METAL VALLEYS AND LAMINATED HIPS & RIDGES

BEGINNING DATE OF IMPROVEMENT: _____ COMPLETION DATE: _____

SIGNATURE OF APPLICANT

Office use:
Received by _____
Received on _____

APPROVED/DISAPPROVED: _____ DATE: _____

APPROVED/DISAPPROVED: _____ DATE: _____

APPROVED/DISAPPROVED: _____ DATE: _____

APPROVED/DISAPPROVED: _____ DATE: _____

THIS APPLICATION IS HEREBY APPROVED/DISAPPROVED

ARCHITECTURAL REVIEW BOARD CHAIR

IF DISAPPROVED, LIST REASON(S) FOR DISAPPROVAL: _____

