

Baytowne West Roof Replacement Guidelines and Authorization

Date Submitted: _____
Name of Homeowner: _____
Address of work being performed: _____
Phone Number: _____ **email:** _____
Name of Unit Supporting Agent: _____
Agent Address: _____
Agent Phone Number: _____ **Agent email:** _____

1. Proof of the contractor's business license and proof of insurance is required to be submitted with this Form. Contractors business card may be used for below information.
2. City of Safety Harbor building permit must be submitted to the Architectural Control Committee *prior* to commencement of work and must be displayed in the bay window.
3. Approved roofing materials and colors:

a. <u>Manufacturers</u>	<u>Shingle Color</u>	
GAF	Slate	_____
Owens Corning	Estate Grey	Company Contractor Name and Phone Number
4. Contractor must have plywood under the tires of vehicles if backing onto the lawn.
 - a. Contractor/Homeowner will responsible for the cost of any damages to the irrigation system.
 - b. Repairs to the irrigation will be made by the Baytowne West Irrigation contractor.
 - c. Homeowner is responsible to see that the Contractor cleans up and removes all debris and roofing nails. Contractor/Homeowner are liable to any nails left behind causing injuries and/or damages.
5. No materials, tools or equipment may be placed or stored on adjoining roofs or properties.
6. Re-roofing must be completed from property line to property line. (4 foot over rule is no longer in effect)
7. **Contractor must obtain this approval form and be posted adjacent to building permit in the bay window before any work starting from Owner.**

I understand that it is my responsibility to ensure these guidelines are followed and the Contractor is aware of these guidelines.

Signature and date of Baytowne West Homeowner and Contractor:

Homeowner Print Name	Homeowner Signature	Date
Contractor Print Name	Contractor Signature	Date

Signature and date of Baytowne West Architectural Control Committee Members:

Date received: _____ Date notified Owner/Agent: _____ Approved() Disapproved()

ACC Signature	Date	ACC Signature	Date
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Architectural Control Committee has 30 days from receipt to review and respond to this application.

If approved, valid for period of 180 days from date of notification to Owner/Agent.

Application must be dropped off at Drop Box next to bulletin board by swimming pool or HOA address.