

# REQUEST FOR REROOFING

To: **Sea Pines Architectural Review Board** Date: \_\_\_\_\_  
**175 Greenwood Drive**  
**Hilton Head Island, SC 29928**

From: **Owner's Name** \_\_\_\_\_  
**Street Address of Property** \_\_\_\_\_  
**Owner's Address** \_\_\_\_\_

**LOT NUMBER** \_\_\_\_\_

**EXISTING ROOFING:** *(Check one and complete)*

\_\_\_\_\_ Wood Shake/Shingles  
\_\_\_\_\_ Asphalt/Fiberglass Shingles Color \_\_\_\_\_  
\_\_\_\_\_ Other (Describe) \_\_\_\_\_

**Minimum requirement: MEET TOWN CODE REQUIREMENT**

**PROPOSED ROOFING:** *(Check one and complete)*

\_\_\_\_\_ Wood Shake/Shingles  
\_\_\_\_\_ Asphalt/Fiberglass Shingles  
\_\_\_\_\_ GAF Timberline Color \_\_\_\_\_  
\_\_\_\_\_ Certainteed \_\_\_\_\_  
\_\_\_\_\_ Owens Corning \_\_\_\_\_  
\_\_\_\_\_ Other Manufacturer \_\_\_\_\_  
\_\_\_\_\_ Other Materials\* Manufacturer \_\_\_\_\_  
Color \_\_\_\_\_

**ROOFING CONTRACTOR:**

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

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

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

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

**Fee Paid** \_\_\_\_\_

Revised February 2019)