REQUEST FOR REROOFING

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

Date: _____

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/Elk Color _____
☐ Certainteed _____
☐ Owens Corning
☐ Other Manufacturer

☐ Other Materials* Manufacturer _____
Color _____

ROOFING CONTRACTOR:

Name: _____

Phone: _____

Submitted by: (Signature) _____

For Office Use Only

Phone No. _____

Fee Paid _____

(Revised June 2024)