

BRYANT WOODS HOMEOWNERS' ASSOCIATION
Exterior Change Request/Roof Replacement Form (submit in duplicate)

DATE: _____
NAME: _____
ADDRESS: _____
PHONE: _____ EMAIL: _____

1. Replacement roofing material must be the same or of an improved quality and appearance when compared to the existing material. For example: tile may only be replaced with tile; cedar shake may only be replaced with tile, cedar shake or with an approved composition material as listed on the reverse of this form. Existing composition shingle roofs may be replaced with the existing roofing shingles or any of the afore-mentioned roof material options. Roof material color must be the same as the existing color, a color from the approved list on the reverse of this form or as may be approved by the Architectural Committee. Material and color must be consistent and the same for the entire roof. Roofs may be repaired as required in an emergency, however, the repair must use the same material as the existing and blend with the undamaged part of the roof so that the repair in not noticeable. Otherwise the entire roof must be replaced to allow for a consistent level of quality and appearance.

2. DESCRIPTION OF PROJECT: Provide details of the project to include roof material manufacturer, material style/design and color of roofing. See reverse side of this form for approved roofing materials. You are responsible for the disposal of all debris.

3. Is the project a roof replacement _____ or a roof repair _____?

4. Project Start Date _____ . Project End Date _____ .
Project to be completed within 60 days after work commences subject to extension of time for good cause.

5. Have you discussed this project with your neighbors? _____

Please allow up to 30 days for review and approval.
Architectural Committee contact: Linda Fuchs, 503-515-5955; email noblends@gmail.com

Codes and Ordinances: Member-Applicant ("Applicant") shall obtain all required building/construction permits and comply with all applicable local and state codes pertaining to the installation and/or repair of the roof.

Applicant agrees that by installing the roof under this approval that the BWHOA (1) makes no representations regarding the adequacy of any submitted plans or whether such plans comply with any or all governing authority requirements and (2) assumes no liability resulting from the approval or disapproval of any plans submitted.

Member-Applicant _____ Date _____
Signature

Approved by _____ Date _____
Signature

Rev. 1/Jan. 22, 2015

**Exterior change Request/Roof Replacement Form-Ctd.
Approved Roof Materials**

Existing composition shingle roofs may be replaced with the same material as the existing, however, it is highly recommended that when replacing a composition shingle roof that one of the following approved materials be used to provide for a longer roof life and a high quality appearance to add value to the home.

1. Clay or concrete tile in natural colors or colors similar to those approved as shown in paragraphs 3 - 9 below.
2. Cedar shakes or shingles
3. Decra Tile Roofing Systems
Colors: a) Weathered Timber; b) Shadow Wood; c) Coffee Brown; d) Granite Gray
4. Certain Teed Presidential, 50-year roof life guaranteed
Colors: a) Shadow Gray; b) Autumn Blend; c) Charcoal Black; d) Weathered Wood
5. GAF Grand Sequoia Roofing Materials
Colors: a) Charcoal; b) Mesa Brown; c) Weathered Wood; d) Cedar
6. GAF Grand Canyon Roofing Materials
Colors: a) Sedona Sunset; b) Black Oak; c) Mission Brown
7. Certain Teed Grand Manor Roofing Shingles
Colors: a) Pearl Black; b) Brownstone; c) Gatehouse
8. ELK Domain Composite Roofing
Colors: a) Shadow Gray; b) Browncastle; c) Ravenswood
9. PABCO Paramount
Colors: a) Antique Black; b) Driftwood; c) Oakwood; d) Pewter Gray;
e) Weathered Wood