

**Shadow Mountain Homeowners Association, Inc.**  
P. O. Box 54006 / Tulsa OK 74155-0006

*HOMEOWNER REQUEST FOR*  
**APPROVAL AND VARIANCE**  
**FOR**  
**ALTERNATE ROOF REPLACEMENT MATERIAL**  
as updated October 2013

**TO: SMHA Building & Design Committee**

HOMEOWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Lot \_\_\_\_\_ Block \_\_\_\_\_ Addition \_\_\_\_\_ (If readily available)

PHONE: Home: \_\_\_\_\_ Work or Cell \_\_\_\_\_

**SUBJECT: Request for Approval of Proposed Alternate Roof Materials**

I have read the Guidelines for Installation/Replacement of Roofs. Attached is my Proposal (Estimate) from the installer including provisions of installation and warranty by the installer as well as basic product specifications and product warranties. I intend to install the following roofing materials:

Manufacturer \_\_\_\_\_

Product Name \_\_\_\_\_

Product Series (Type of Shingle) \_\_\_\_\_

Color (Shall conform to shake or weathered wood color) \_\_\_\_\_

Warranty Period (**Lifetime Required**) \_\_\_\_\_

Note: Shingle must be Algae Resistant or Stain Resistant for approval.

Contractor / Installer \_\_\_\_\_

**Contractor State License Number** \_\_\_\_\_

Questions and/or Comments \_\_\_\_\_

**NOTE: Signed copy of the contractors quote shall accompany this request before variance can be approved. Contract shall meet all specifications as stated above. Homeowner(s) please sign below.**

Signature: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

**Contact Steve Mueller, 918-488-8875 or 918-810-7911, e-mail: [steve@shadowmountaintulsa.com](mailto:steve@shadowmountaintulsa.com) Chairman, Building and Design Committee** to discuss the SMHA Guidelines, for information on materials, an installer or to process your request. To locate Contractor State License # on website, go to [www.ok.gov/cib/roofing\\_contractors/](http://www.ok.gov/cib/roofing_contractors/) then scroll down and search either by owner name or business name.