

**REQUEST FORM  
ROOF REPLACEMENT FOR SINGLE FAMILY HOME  
CRYSTAL TREE SUBDIVISION**

**HOMEOWNER:**

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

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

\_\_\_\_\_

**CONTRACTOR:**

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

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

\_\_\_\_\_

**APPROVED SHINGLE**

Single Family homeowners have the following options of roof replacement shingles:

- GAF/ELK Timberline Ultra Lifetime High Definition Shingles with an extended warranty (Choice of asphalt shingle colors)
- GAF/ELK Lifetime Designer Shingles (Choice of asphalt shingle colors & styles)
- Cedar Shake & Shingle
- Fiber Reinforced Concrete Shingle (Choice of colors). Submit product specifications for approval process.

**Be Wary, One Final Note:**

Many of the high-end, man-made roofing materials made in the last 10-15 years have failed prematurely. Most of these materials promised 50 year warranties. Many homeowners are stuck with failing high dollar roofs, and are involved in class action law suits. Be careful, and only select materials that have a proven track record. Investigate thoroughly.

**Replacement Shingle Will Be:** \_\_\_\_\_

**Choice of Color (If applicable):** \_\_\_\_\_

**Choice of Style (If applicable):** \_\_\_\_\_

**APPROVALS:** Homeowner must receive a FORMAL, WRITTEN APPROVAL from the Homeowners' Association before proceeding with a roof replacement.

**PERMITS:** The homeowner shall be responsible for securing a permit from the Village of Orland Park. This Permit must be displayed in your front window.

**CERTIFICATE OF INSURANCE:** Your contractor must supply you with a certificate of insurance, stating that you (as homeowner) and the Crystal Tree Homeowners' Association are listed as additional insured. A copy of this certificate must be submitted along with your Request Form.

**ROOF REPLACEMENT GUIDELINES:**

- Complete tear off required.
- Ice and water shield shall extend up the roof to a point 24 inches from the inside of the exterior wall.
- Ice and watershield shall be installed 36 inches around perimeter of chimneys and skylights, also a minimum of 36 inches in valleys and along sided walls.
- Install new lead flashings to soil vent pipes.
- Felt installation according to manufacturer's specifications.
- Ridge Vents for GAF/ELK Roof Shingles – GAF Cobra Snow Country Ridge Vent.
- Must comply with all Village of Orland Park requirements.
- Dumpsters to be placed on driveway. (Placing dumpsters on street is prohibited.) Dumpsters should be placed, by contractor, on plywood or planking to protect driveway.
- No construction materials to be placed or stored on streets.

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**CONTRACTOR'S AGREEMENT TO COMPLY:** I have read the completed Request Form, and agree to comply with all architectural requirements as directed. I understand that any product or workmanship that does not comply with the architectural requirements, as stated, will have to be brought up to those standards immediately, or the privilege of performing future work within the Crystal Tree Subdivision will be forfeited.

**Contractor's Signature:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

**State License Number:** \_\_\_\_\_

**Homeowner's Signature:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

**SEND COMPLETED REQUEST FORM, ARCHITECTURAL REVIEW FEE OF \$50.00 PAYABLE TO THE CRYSTAL TREE HOMEOWNERS' ASSOCIATION AND A COPY OF THE CERTIFICATE OF INSURANCE TO:**

**SCHRANK & ASSOCIATES, INC.  
P.O. BOX 186  
ORLAND PARK, IL 60462**

\*\*\*\*\*

**This portion for office use only:**

**Address of Roof Replacement:** \_\_\_\_\_

**ARCHITECTURAL REVIEW**

Approval: \_\_\_\_\_yes \_\_\_\_\_no

Reason for Refusal (if applicable) \_\_\_\_\_

\_\_\_\_\_  
**Board Member Signature:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

**Additional Notes:**