



Lake Shastina Property Owners Association

16320 Everhart Drive – Weed, CA 96094

Phone: (530) 938-3281

Fax: (503) 938-4739

Re-Roof Application

Date: _____ Application No.: _____

APN: _____ ECC Member: _____

Name: _____ Unit: _____ Lot: _____

Mailing Address: _____

Project Address: _____

(If different than mailing address)

Cell Phone: _____ Alternate Phone: _____

Email Address: _____

I(We) authorize the LSPOA to send all correspondence regarding this application to the email address noted above: YES _____ NO: _____

Contractor Name: _____

Contractor Business: _____

Cell Phone: _____ Alternate Phone: _____

Required Information to be submitted with Application:

Roof Colors Sample or Photo Print out Roof Material Type

Deposits and Fees:

\$ ___ 100.00 _____ \$100.00 – Plan Compliance & Clean Up Deposit

\$ ___ 20.00 _____ \$20.00 – Inspection Fee.

\$ ___ 120.00 _____ **TOTAL FEES AND DEPOSITS**

IMPORTANT NOTICES

***Note: All Deposits are interdependent and will be held until project meets final plan compliance.**

***Note: Re-Inspection Fees vary from \$10.00 – \$50.00 depending upon subject.**

***Note: A \$35.00 Project Extension Fee will be applied after 1 year for each additional 6 months.**

***Note: All Fees and Deposits are subject to change by LSPOA Board of Directors**

ANY CHANGES TO ORIGINAL APPROVED PACKET MUST ALSO BE

SUBMITTED FOR APPROVAL BEFORE CONSTRUCTION

By signing this Application you are authorizing the Lake Shastina Property Owner's Association and its agents to enter your Lot(s) for purposes of inspection for any applicable Covenants, Conditions and Restrictions as they pertain to the purposed property Improvement, Modification or New Home Construction stated in the above project description.

Owner's Signature: _____ Date: _____

If contractor is acting as owner's agent and in behalf of owner, please sign below. Notices to be sent to owner.

Contractor's Signature: _____ Date: _____