



**CITY OF NORTH LAUDERDALE
COMMUNITY DEVELOPMENT DEPARTMENT**

**ROOF APPROVAL FORM
SEAVIEW/SILVERADO OVERLAY ZONING DISTRICT**

DATE: _____

OWNER'S NAME: _____

ADDRESS: _____ TELEPHONE: _____

LEGAL DESCRIPTION: LOT _____ BLOCK _____ SUBDIVISION _____

OWNER/CONTRACTOR: _____

CONTRACTOR'S LICENSE: _____

COMPANY NAME: _____ TELEPHONE: _____

SIGNATURE OF OWNER (*Notarize*)

PRINT NAME OF OWNER

The foregoing instrument was acknowledged before me this _____ day of _____, 200__.

Notary Public Signature

NOTARY PUBLIC STAMP/SEAL

ROOF TYPE: _____ COLOR: _____

ADJOINING UNIT OWNER'S STATEMENT

I, _____ agree to change the roof of my townhouse (whenever needed) in accordance with the Seaview/Silverado Overlay Zoning Ordinance. I agree with the roof type and color chosen by my adjoining unit owner _____ of _____ (address).

SIGNATURE (*Notarize*)

ADDRESS

The foregoing instrument was acknowledged before me this _____ day of _____, 200__.

Notary Public Signature

NOTARY PUBLIC STAMP/SEAL

REVIEWER'S SIGNATURE: _____ DATE: _____