

Roofing Installation Information Document

This document is exclusively for providing your insurance company with the required roofing information that may entitle you to a reduction on your insurance premium. Presenting this document does not guarantee a reduction will be honored. All decision regarding a reduction will be a case-by-case decided by the individual insurance underwriting department. This document is not to be used for or implied as any type of warranty by the installer, supplier, or manufacturer.

Homeowner:

Name: Lewiston Townhouse Condo Assoc.
Address: 321 Bighorn Dr. Unit #A
City: Estes Park State: Colorado Zip: 80517
Insurance Company: N/A
Policy Number: N/A

Roofing Company:

Name: Gold Roofing, Inc
Address: 1424 E Eisenhower Blvd
City: Loveland State: CO Zip: 80537
Phone: 970-593-3080 Fax: _____

I, McCall Leeman, an authorized representative of Gold Roofing, Inc, do hereby certify that our roofing company has inspected and or installed, in accordance with the manufacturer's specifications on the above described residence a roof covering listed as complying with Underwriters' Laboratory Standard 2218, Impact Standard for Impact Resistance of Prepared Roof Covering Materials with an impact resistance classification of:

NOT IR: _____

CLASS 3: _____

CLASS 4: ~~_____~~

Manufacturer's Name: Owens Corning
Brand Name: Owens Corning Tru Def Duration FLEX Class 4 IR
Date of Installation: 06/14/2023 Color: Driftwood


Original Signature of Roofing Company's Authorized Representative

3/25/2026

Date

Any intended falsification relating to the completion or presentation of this form constitutes fraud.