



17th Annual Roof Giveaway 2025

Sponsored By: East Coast Roofing Corporation, Inc. t/a East Coast Roofing,
Siding & Windows

Phone: (609) 646-1444 | NJHIC #: 13VH00181500

Since 2009, East Coast Roofing, Siding & Windows has been donating at least one roof per year to a deserving community member. From veterans to first responders to outstanding community members, we're looking for ONE deserving homeowner in Atlantic/Cape May County, or Cumberland County, New Jersey.

Please follow the guidelines below for your application to be considered:

- Must be a South Jersey Resident in Atlantic/Cape May County, or Cumberland County.
- Self nominations will be accepted.

The selection of the winners will be made at the final, sole and non-reviewable discretion of East Coast Roofing, Siding & Windows.

Please complete the attached application in its entirety. It is extremely important that as much information about yourself if self-nominating, or the person/family you are nominating, is included as we take all factors into consideration.

Self-Nominations:

- If you are nominating yourself, it is very important that you check the box in part 1.
- Be sure to complete all parts of the Application.

To Nominate Someone:

- Include your information as you will be our primary source of contact should we have questions about the nominee or if your nominee is selected.
- Please include a photograph of the house.
- If a printed copy, please note it cannot be returned.

- No purchase is necessary to submit a nomination or to be chosen as the winner.

Deadline:

- All nominations must be received by 11:59pm on November 28th, 2025.
- Any nominations received after this date unfortunately will not be considered.

Submission Options:

Applications can be submitted via this form or printed/mailed.

Applications can be accepted by:

- Mail or delivery to our office: 6090 Danenhauer Lane, Suite 9, Mays Landing, NJ 08330
- Fax: (609) 625-1889
- Email: office@eastcoastroofing.com

How to upload a photograph:

Please include a photo of the home. Image must first be converted into a PDF to upload to this form.

Part 1: Your Information

Please fill out this information as the applicant.

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

County: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Relationship to Nominee: _____

How did you hear about the giveaway?: _____

☐ Check here if you are self-nominating.

Part 2: The Nominee

Name: _____

Home Address: _____

City: _____

Zip Code: _____

County: _____

Mailing Address (if different): _____

City: _____

State: _____

Zip Code: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Widowed

List all members currently living in the household: Name, Age, DOB (MM/DD/YYYY), Relationship, Occupation

Part 3: The Service

If applicable, describe the nominee's military branch of service and years of service. If a first responder, indicate Police, Fire, or EMT.

Proudest achievements and/or community contributions:

Part 4: The Story

Tell us about the person or family you are nominating. What makes them unique? Are there circumstances affecting their home life? How have they impacted others?

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Does the nominee own the home? ☐ Yes ☐ No

Number of stories: _____

Sloped or flat roof? _____

If so, for how long? _____

Describe the condition of the roof:

Part 6: References (For Self-Nominations Only)

List three or four references: Name, Address, Phone, Relationship

Part 7: Program Requirements, Consents, and Releases

If your nominee is selected, you may be filmed, videotaped, and photographed. Your name, image, and likeness may be used in, or to publicize, East Coast Roofing Corporation, Inc. By signing below, you authorize East Coast Roofing Corporation, Inc. to use your name, information, and likeness for promotional purposes and hereby waive any rights of privacy in connection with this program and certify that all information stated by you on this application form is true.

ACKNOWLEDGMENTS:

1. I am not an employee of East Coast Roofing Corporation, Inc. or an immediate family member of the owner.
2. My name, voice, actions and likeness may be recorded on audiotape, videotape or otherwise. 3. I agree to keep strictly confidential all information about the program that I acquire during the participant selection process and/or my participation in the program.
4. If my nominee is selected as a participant, East Coast Roofing Corporation, Inc. has no obligation to broadcast or exploit the program.
5. I will appear on camera if requested and share why I nominated the winner, why they are deserving and in need, and how it will help their family if they are the free roof recipients.

I further understand the following:

1. If my nominee is selected as a participant, I will execute all waivers and release agreements required by the East Coast Roofing Corporation, Inc.
2. The selected nominee will execute all waivers and release agreements required by East Coast Roofing Corporation, Inc.
3. This is a rolling application process; applicants can be contacted at any time in the future.
4. Applications will only be considered if they are complete.

All materials you send (including videotape and photos) will be retained by East Coast Roofing Corporation, Inc. and shall become their property. They will not be returned to you whether or not your nominee is selected as a winner. Any expenses you incur during the application process including postage, shipping, and material preparation (videotape, photos, etc.) are your sole responsibility. East Coast Roofing Corporation, Inc. will not reimburse you for these expenses. Only one entry per nominator is allowed. All decisions of the East Coast Roofing Corporation, Inc. are final.

UNFORTUNATELY, WE WILL NOT BE ABLE TO VERIFY THAT WE HAVE RECEIVED YOUR APPLICATION. WE ARE NOT RESPONSIBLE FOR LOST APPLICATIONS.

I authorize East Coast Roofing Corporation, Inc. to investigate, access and collect information about me, about any of the statements made by me on my application, any supporting documents, and any other document that I have signed or do sign in connection with my application to be selected a participant in the program, or any other written or oral statements I make in connection therewith, and hereby waive all rights of privacy or confidentiality that I might otherwise have in such information. I acknowledge and agree that any such information obtained by East Coast Roofing Corporation, Inc. pursuant to this paragraph or otherwise may be used for purposes of selecting participants in the program, and may be described or otherwise related to and in connection with the program, including, without limitation, in advertisements, promotions, publicity, marketing, merchandising, and in any other manner.

East Coast Roofing Corporation, Inc. does not discriminate on the grounds of age, ethnic or national origin, nationality, language, religion, belief, opinion, health, disability, or sexual orientation. I HEREBY CERTIFY THAT ALL OF THE INFORMATION PROVIDED ABOVE AND IN THIS APPLICATION IS TRUE AND COMPLETE. I UNDERSTAND THAT ANY FALSE STATEMENT OR MATERIAL OMISSION BY ME MAY LEAD TO THE DISQUALIFICATION OF MY NOMINEE FROM PARTICIPATION IN THE PROGRAM AND/OR THE PARTICIPANT SELECTION PROCESS FOR THE PROGRAM.

Print Name

Signature----- Date