Windstone Community Association II, Inc.

Windstone and Black Walnut Trails Units 6, 7 & 8

Additions & Alterations Application

Contact Information:

P.O. Box 46 Phone: 630.270.1838 Aurora, IL 60507 Fax: 630.897.2440

Projects that require a permit from the \	Village <u>MUST be approved</u> Failure to do so may result	-	O seeking a building permit.
Homeowner:			Date:
Address:			Lot Number:
City:	State:	Zip Code:	
Home Phone:	Cell Phone:	Work	Phone:
E-mail:	Type of Improvement	t:	
If other, please list:			
Description of Improvement:			
Dimensions: Supplier: Note: It is the responsibility of the homeowr in the Covenant or Rules and Regulation Work to be performed by: Self	ner to obtain all necessary vill on can not be approved by th	nis committee.	ns or improvements not listed
Work to be performed by: Self	Licensed Profess		The Control of the Control
Drawing included	Plat survey included	Refer to the General Modit or Pool Checklist for additi	
Drawings of all improvements must be subron lot. As of the approval date of this application presentable condition. If you are submitting this form electronically	ation, I accept full responsibili	ity for the altered area and agi	•
Signature:			ubmit Date:
	entation (e.g. photos, drawing ndstone Community Associat o Baum Property Managemen	tion II, Inc.	-mail, fax, or U.S. mail to:

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