Muir Hill Estates Exterior Modification Application and Maintenance Agreement

Owner's Name:	Date:
Street Address of Proposed Modification	tion:
Home Phone:	_ Work Phone:
1. a) Describe briefly your proposed r	nodification(s):
b) Proposed location/grade:	
c) Proposed elevation/shape/dimensi	ons/exterior color plans:
d) Type/color of proposed material:	
	specifications, and/or pictures showing the and location of proposed modification(s).
3. I/We	, the owner(s) of (address)
modification, if approved by the Archi subject to the listed or attached cond	, understand that the above requested tectural Control Committee (ACC), is itions, and shall be maintained by me in ovenants of Muir Hill Estates and any listed

I/We understand and agree that work relative to the above modification(s) shall not commence until written approval has been received by me. I/We also understand, that should any such work being or be completed without written approval, I/we may be required to return the property to its former condition at my own expense, and that I/we may be required to pay all legal expenses incurred by the Homeowners' Association related to such unapproved work or modification(s).

Signature of Owner(s):	Date:	
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Signature of Owner(s): _____ Date: _____

Mail or Hand Deliver to ACC Chairman

Date Received: _____ Received by: _____

Approval/Denial

The Architectural Control Committee of Muir Hill Estates approves / denies your requested modification, subject to the following conditions:

ACC Chairman:	Date:
ACC:	
President:	Date:
Secretary:	