Architectural Control Committee

Property Alteration Request

Name:	
Address:	email address:
Telephone:	Date:
Attach the following applicable d	ocumentation:
2. Plans, drawings, speci 3. The contractor's name 4. Materials to be used i 5. Changes in landscape I (We) do hereby agree to be resp and upkeep of the modification/of the Agreement runs with the pro and I (We) agree to maintain a co	g the location of the change on your property. Fications, photographs, as applicable. It and address that will perform the work. It is not a manufacturer and color of the items. It is removal or additions of trees, shrubs or planting beds) on sible for the installations, maintenance, repairs, insurance thange described above to my (our) unit. I (We) acknowledge perty and will be binding on all subsequent owners of this unpy of this Agreement and request, if approved, as part of the
permanent record of this home, t	o be forwarded to any subsequent owners.
Owner	Owner
Date	 Date
• •	ntation and request form to Howard Lohf – mittee will respond within 30 days with their approval or
	Date ttee) Accepted () Rejected