

CHANGE REQUEST FORM

		Date.		
Name:	Cha	Change Requested to:		
Address:	Priv	Patio or Deck Private Yard		
Telephone:	Evt	Landscaping Exterior Model Name of		
receptione.				
Description of Change:	rou	Your Unit		
Description of Change.				
Attach pictures, catalog cuts, color samp the requested improvement. Please also shrubbery planting beds. Owner must property, and owner will repair any dammanner. Owner will be responsible for repair and finish dates: Start Submission of this form and its approval obligation to abide by all Township ordinathere will be a site visit by Landscape or A	specify the size, ty notify neighbors if nages to a neighbor pairs for any damage or disapproval by the nances and permit re	rpe and number of project will interfer so project will interfer so property to its ories made to common a similar finish	pieces for trees and/or re with the neighbor's ginal state in a timely rea.	
Owner's Signature		Owner's Signature		
*** If this request is denied by the Comr of Directors. ***	nittee, the homeown	er will have the right	to appeal to the Board	
COMMITTEE ACTION:	DATE:	INITIALS:	COMMITTEE:	
Recommended				
Not Recommended				
Board Approved				
COMMENTS				