

EXTERIOR ALTERATION REQUEST

HOMEOWNER: _____

ADDRESS: _____

PLEASE RETURN COMPLETED FORM TO:

PHONE: _____

Bob Arthmann

c/o HHOA Architectural Committee

34 Glenn Haven

Spencerport, NY 14559

EMAIL: rarthmann@rochester.rr.com; Phone: 585-258-3598

TO THE BOARD OF DIRECTORS:

I understand no work should begin until written approval is received.

I REQUEST PERMISSION TO MAKE THE FOLLOWING CHANGES TO THE EXTERIOR OF MY PATIO HOME, INCLUDING LANDSCAPING, PLANTINGS, ETC. I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO OBTAIN ANY BUILDING PERMITS THAT MAY BE NECESSARY FOR THIS WORK. I HAVE ATTACHED A SKETCH OF PROPOSED CHANGES, LISTED MATERIALS TO BE USED, AND INDICATED WHO WILL DO THE WORK (please be explicit; extra sheets may be attached).

REASON FOR EXTERIOR ALTERATION REQUEST: _____

WHO WILL COMPLETE THE WORK? (All contractors must provide RPG a certificate of insurance evidencing appropriate liability and workers compensation insurance): _____

LENGTH OF GUARANTEE (If applicable): _____

INDICATE ANY FUTURE MAINTENANCE THAT MAY BE REQUIRED BY THE ASSOCIATION: _____

DATE

SIGNATURE OF PETITIONER