**REQUEST FOR ARCHITECTURAL/LANDSCAPE CHANGES**

**ESTATES AT TWEED CROSSING**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Owner(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone # (day) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(evening) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Project Description: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**(Please continue on another piece of paper as needed and attach all requested forms and information per instructions)**

**Proposed start date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Planned completion date: \_\_\_\_\_\_\_\_\_\_\_\_**

**Work to be completed by (Contractor): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Has project been discussed with neighbors abutting your property? (not required but recommended) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**All work must receive prior approval from the Board of Directors. Contractors must submit a Certificate of Liability Insurance with required Additional Insured designations.**

**==========================================================**

**As the Unit Owner, I/we agree to be totally responsible for the entire installation, maintenance, and upkeep (replacement, insurance, etc.) for the above request, if approved. This agreement will be made part of any agreement of sale that I/we may enter into for the above-mentioned unit.**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* office use only \*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

Date received by HOA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

ACC recommendation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Board action: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner notified\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_