

REQUEST FOR PROPERTY MODIFICATION(S)

To: Community Name: _____
c/o GW & Associates, Inc.
1585 Old Norcross Road, Suite 101
Lawrenceville, GA 30045

Name: _____

Date: _____

Address: _____

Phone: _____

Fax: _____

Modification(s) Requested

- | | |
|---|--|
| <input type="checkbox"/> Fences (materials, style, plat & sketch) | <input type="checkbox"/> Structure Modification (plan) |
| <input type="checkbox"/> Landscaping (species ID & sketch) | <input type="checkbox"/> Structure Addition (plan) |
| <input type="checkbox"/> Repainting (color changes) | <input type="checkbox"/> Tree Removal (sketch) |
| <input type="checkbox"/> Spas & Pools (plan, style) | <input type="checkbox"/> Recreation Equipment (type, location) |
| <input type="checkbox"/> Screening (type & elevation) | <input type="checkbox"/> 18" Dish (location & elevation) |
| <input type="checkbox"/> Other (describe thoroughly) | |

NOTE: Attach all information required & sketch on back as noted above.

Work to be completed by _____ Time frame of the project _____

Description of work: _____

Received by: _____ Date: _____

Response: _____

Approved Conditional Approval Disapproved

Date Responded: _____ Responder: _____

Project Completed In Compliance Further Action Required

Comments: _____
