BUILDING ALTERATION APPLICATION

Quarry's Edge VILLAS

To expedite the approval process, please provide specific information about the exterior alterations that you would like to make. Include diagrams of the proposed changes. (Please Print All Information)

Your Name: _____

Your Address: _____ __

Proposed Alterations/Changes:

_____

_____

_____

Your Daytime Telephone: _____ Cell Phone: _____

Please check the improvement/alteration that you are requesting:

□ Deck or Patio	□ Exterior Lighting	□ Exterior Painting
□ Storm Door	□ Statuary or Planter	□ Trellis or Fencing
□ Satellite Dish	□ Window	□ Other

Explain Other: _____

_____ _____

_____ _____

Please check one of the following: □ I will do the work myself. □ A professional will do the work.

Name & Phone of Contractor: _____

Is the Contractor: □ Licensed? □ Bonded? □ Insured?
(Please Attach printed verification of the above.)

Estimated start date: _____ Estimated completion date: _____

Please attach Additional Explanations, Diagrams, Drawings, and/or Photos, as needed.

Owner's Signature: _____Date:_____

Your Contractor MUST SIGN this Application and all supplied Texts, Diagrams, Sketches, and Photos.