Yarmouth Way Condominium Association ARCHITECTURAL COMMITTEE (AC) IMPROVEMENT REQUEST

Managed by: Creekside Community Association Management PO Box 325, Eldorado Springs, CO 80025 Phone: **303-443-7872** Fax: **303-499-0684**

FOR OFFICE USE ONLY Date Received
Critical Date
Date Sent to AC
Date Received from AC
Rep

Mailing address if different that My request involves the follow Satellite Dish Air Window Replacement Other Describe Improvements: (Inclinated Completion Date: I understand that I must receiva approval does not constitute a permit. I agree to complete in drainage away from my found building improvements. Upon	State:	Zip:	ans, and other plans or brochures for patic
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Community Management Spe	pproval of the local building aprovements promptly after ation and not impede prope the completion of my impro	g department and tha receiving approval. I er drainage swales or ovement I hereby aut	der to proceed. I understand that AC at I may be required to obtain a building I also understand that I shall maintain propin my lot when installing landscape or thorize the Architectural Committee and pection at a mutually agreed upon time.
Date:	Homeown	ers Signature:	
AC ACTION: Approved as Submitted.			
	llowing requirements		
_	tural Improvement/Mainten		
Architectural Committee Member			Date: