

TRAVERS MANOR HOMEOWNERS ASSOC., INC.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE \_\_\_\_\_ DATE SUBMITTED \_\_\_\_\_

1. EXTERIOR PROPERTY ALTERATION REQUIRED (PLEASE CHECK ALL THAT APPLY FOR THE FIRST THREE ITEMS. SPECIFY ONLY IF REQUESTING AN ITEM OTHER THAN APPROVED STANDARD.)

( ) Storm Door \_\_\_\_\_

( ) Deck Weather Seal \_\_\_\_\_

( ) Awning \_\_\_\_\_

( ) Landscaping (e.g. shrubbery, trees, flower beds, etc.)

( ) Foundation Painting – Color must match existing

( ) Rain Gutters – Color must match existing

( ) Lawn Ornaments

( ) Privacy Fencing – Description – Sketch

( ) Patio \_\_\_\_\_ New \_\_\_\_\_ Expansion

( ) Deck \_\_\_\_\_ New \_\_\_\_\_ Expansion

( ) Other (please describe) \_\_\_\_\_

\_\_\_\_\_

2. PLEASE INCLUDE SKETCH OR COPY OF PLANS OF PROPOSED ALTERATION. INDICATE NUMBER OF TREES, SHRUBS, SIZE OF FLOWER BEDS, FENCING, PATIOS OR DECKS.

3. PLEASE SUBMIT THIS REQUEST AND PLANS/SKETCHES TO MANAGEMENT.

ARCHITECTURAL COMMITTEE RECOMMENDATION

( ) Approve

( ) Disapprove

\_\_\_\_\_  
Committee Member

\_\_\_\_\_  
Date