

RJ COMMUNITY MGT. 4900 Perry Highway Building 1, Suite 300 Pittsburgh, PA 15229 Ph: 412-550-0003 Fax: 412-227-9003 WWW.RJCMGT.COM

TWIN OAKS MANOR APPLICATION FOR ALTERATION

NO ALTERATION MAY BEGIN UNTIL APPROVAL IS GRANTED Please email your completed form to the Community Manager or mail to the address above.

Name of homeowner requesting approval (Please print) Date
Address of home where alteration will occur
Phone number(s)
Email address(es)
Mailing address of homeowner (If different than above)
Type of alteration:
Window Building Exterior Other (Please specify):
General location of alteration in or around your home:
Front Side Rear Other (Please specify):
Scope of Alteration: Please explain in detail what you are requesting permission to do, including exact location and dimensions:
Effect on the Existing Area: Explain if any existing elements will be affected by this alteration (will existing shrubs be moved, or part of existing porches be dismantled, etc.):

10. Describe the type, appearance	and quantity of all materials to be used:
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11. Effect of alteration on neighbors to either side of your home:

12.	Signature o	f nearest	neighbors	to th	e right	and	left	of	your	home	signifying	that,	as a	a courtesy	, the
	adjoining ne	eighbors h	nave been r	nade a	ware o	of thi	s alte	erat	ion re	equest.					

NOTE: If you are unable to obtain the signatures of one or both of your neighbors, you must explain the reason below:

13. If applicable, please attach a drawing showing all existing elements, including shrubs and porches in solid lines and proposed alterations in dotted lines. Include the first three feet of your neighbors' homes and yard in the drawing. Show distance from nearest existing elements to proposed additions or alterations.

14.	Expected start date:	Completion date:	
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15. Additional Notes:_____

Please attach drawings, brochures, pictures, etc. to this form.

APPLICANT: PLEASE DO NOT WRITE BELOW THIS LINE.

Approved By:	Date:
Title:	