

DATE: \_\_\_\_\_

SPRING GROVE ESTATES CONDOMINIUM ASSOCIATION  
APPLICATION FOR ALTERATION APPROVAL

1. \_\_\_\_\_  
Address Phone number(s)

2. Type of alteration:  
Landscape  Building Exterior  Other (Specify): \_\_\_\_\_

3. Location of alteration in or around your home:  
Front  Side  Rear  Other (Specify): \_\_\_\_\_

4. Scope of Alteration: Please explain in detail what you are requesting permission to do –  
Approximate dimensions, effect on the existing area and neighbors (if applicable).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Materials to be used: Describe the type of materials to be installed and quantities of each material.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 6. PLEASE ATTACH ANY DRAWINGS, BROCHURES, PICTURES, ETC. TO THIS FORM.
- 7. Expected start date: \_\_\_\_\_ Completion date: \_\_\_\_\_
- 8. Additional notes: \_\_\_\_\_
- 9. SIGNATURE OF OWNER: \_\_\_\_\_ DATE: \_\_\_\_\_

**NO ALTERATIONS MAY BEGIN UNTIL APPROVAL IS GIVEN BY THE BOARD WITHIN 30 DAYS OF REQUEST SUBMISSION**

**APPROVED BY BOARD MEMBERS**

NAME	DATE
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**\*\*PROJECT COMPLETION MUST BE WITHIN 60 DAYS OF START DATE\*\***