GLENNSTONE HOMEOWNERS ASSOCIATION

REQUEST FOR ARCHITECTURAL APPROVAL

DATE REQUEST SUBMITTED:

		ATE REQUEST SUBMITTED.		
APPLIC	ANTS INFORMATION:			
NAME:				
PHONE	: Work:	Home:		
	Mobile:	Other:		
EMAIL(s) :			
Type of	f Modification: (Check O	ne)		
	Addition/Screened Porch Storm Door			
	Deck/Patio Trash Enclosure			
	Fence			
	Other:			
	Landscape Modification (Describe)			
	TANT: PLEASE ATTACH A	A DETAILED DESCRIPTION OF IMPROVEMENTS & MODIFICATIONS, WHEN APPLICABLE:		
	1. Location	7. Plans/Drawing		
	2. Size	8. Roof Design		
	3. Color	9. Exterior Finish		
	4. Material	10. Dimensions		
	5. Contractor	11. Utilities		

12. Types of plants, quantities, addition or removal

with proposed existing or new planting bed, edge treatment changes additions

6. Copy of Survey

shown

Estimated Start Date:			
	etion:		
Company or individual do	oing the work (if applicable)		
NAME:			
ADDRESS:			
PHONE: Work:	Mobile:		
EMAIL(s) :			
and Requests for Multiple	I Committee Reserves the Right to Request More Infection of Changes Should Be Submitted Separately. Cracmanagement.com or Mail Paper Applications To:		
TRAC Management, LLC	or want aper Applications to:		
C/O Thomas Whisnant			
PO BOX 3674, CHAPEL HIL	.L, NC 27515		
Email: tom@tracmanager	nent.com		
Reviewed By HOA/Management: Date:			
Approved By HOA/Manag	gement		