

ALTERATION REQUEST FORM
GREENCASTLE MANOR CONDOMINIUM No. 2

Date of Request: _____

Property Address: _____

Name of Homeowner (s): _____

Telephone Numbers: (Home) _____ (Work) _____

DESCRIPTION OF ALTERNATION DESIRED

(Please provide all pertinent information, describing kind of materials or products to be used, dimensions and location. Attached a sample of paint or stain color, if applicable. For structural modifications, ground plantings, fencing and decks, please attach a sketch, clipping or photograph of the alteration.)

(ATTACHED ADDITIONAL SHEETS, IF NECESSARY)

Terms and Condition

- 1.) I understand and agree that work on the proposed alteration or modification will not commence until written approval of this Alteration Request by the Board of Directors has been received by me.

- 2.) A review of this Alteration Request will be completed within thirty (30) days of its receipt by the Architectural Advisory Committee.

- 3.) A Certificate of completion will be provided to me upon completion of the approved alteration.
- 4.) Any approval of this Alteration Request by the Board of Directors shall be valid for a period of (6) months, but may be renewed upon the request of the homeowner.
- 5.) I represent and warrant that the proposed alteration will be completed in strict conformity with the Alteration Request as approved by the Board of Directors.
- 6.) If disagree with the Board's decision, I am entitled to a hearing at the next regularly scheduled meeting of the Board.

Signature: _____
(Homeowner)

Mail or Deliver To:
Abaris Realty
7811 Montrose Road
Suite 110
Potomac, MD 20854
(301)468-8919 ext 134
sambush@abarisrealty.com

This alternation request is herby:

() Approved in its entirety.

() Approved, subject to the following restrictions or modifications:

() Denied for the following reasons:

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The unit owner of Greencastle Manor Condominium No. 2, INC

For the Board of Directors:

By: _____

Shireen Ambush, Property Manager