

Teal Lake Village Association Common Area Modification Application

Resident _____

Address _____

Lot number _____ Telephone _____

Email address _____

Description of project, including changes from a previously approved project and/or time frame:

Starting date _____ Expected completion date _____

Who will perform the work? _____

Attach a list the names and addresses of all other TLVA residents who might be affected or able to view the requested modification.

Did any neighbors express any objections or concerns about the requested plans?

Yes _____ Describe _____

Resident signature _____ Date _____

Teal Lake Village ARC Review Approved _____ Disapproved _____

Approved with conditions _____

Teal Lake ARC signature _____ Date _____