ARCHITECTURAL MODIFICATION REQUEST FORM BROOKCLIFF PROPERTY OWNERS ASSOCIATION, Inc.

Upon completion submit form by creating a PayHOA Architectural Request.

In accordance with the Declaration of Protective Covenants of the Brookcliff Property Owners' Association, I hereby apply for permission to make the following alterations to the premises located at:

Street Address:			
Location(s) and Description of Modifie	cation(s):		
Details including product(s), color(s) and similar elements:			
Note: Attach any sketches, drawings a the following information about the co a separate attachment:	*	O 1	
Company Name:	(Contact:	
Email:		Phone:	
EXCEPTIONS or SPECIAL CIRCUM	ISTANCES:		
Owner Address:Phone:			
Date:	_ Signature:		
You agree that any electronic signatures appearing of	-		
Note: Please allow a minimum of	8 days for a response.		Committee and Board Use Only
Architectural Control Chairperson:		Date:	
Comments:			
Decisions:			
Approvals:			