

Fork Landing Farms Homeowners' Association

APPLICATION FOR LANDSCAPE IMPROVEMENTS

Application Date: ____/____/____

Date Received: ____/____/____

1. Owner's Name: _____ Lot # _____

Address: _____ Camberly Drummond Knotts Phone: ____-____-_____

2. Contractor Name, if applicable*: _____

Address: _____

Phone: ____-____-_____ Del. License #: _____ Exp. Date: ____-____-_____

Insured: Yes No Bonded: Yes No

If using a Contractor, attach a copy of the Contractor's Insurance Declaration Page

1. Brief description of work to be done: _____

Date work is to start: ____/____/____ Estimated completion date: ____/____/____

Names of plants or type of materials to be used (provide plant/tree genus, species, and/or common name):

2. Other Information _____

* If required by the ALARC, attach a drawing showing the proposed work. Submit applications to any member of the Architectural/Landscape Review Committee. The committee will review all requests and respond as soon as possible.

For Architectural/Landscape Review Committee Use:

Meeting Date: ____-____-_____ Response sent to Homeowner: Yes No

Action Taken: _____

Landscape improvement completion date: _____