WESTMINISTER

HOMEOWNERS ASSOCIATION

REQUEST FOR ASSOCIATION APPROVAL

This form is designed to make the Request for Approval Process quick and easy for you and the Association. Project details must be submitted with this form to expedite the Association's review. Be sure to keep a copy of this request form and attachments for your records. Once you have filled out and signed the form you may email, drop off or mail it to the WHOA board. All board members contact information is located at https://www.westministerhoa.org/YOUR APPLICATION MAY BE DELAYED AND/OR DISAPPROVED IF IT IS INCOMPLETE OR CANNOT BE UNDERSTOOD.

Please fill out the entire	form.		DATE: / /	
ADDRESS: OWNERS NAME: HOME PHONE: (MAILING ADDRESS IF DI		WORK (DAY TIME) PHO	NE: ()	
anywhere in your yard, call easements and some are not responsible for any and all c	gas, power, telephone and cable con All maintenance, repairs and/or re common grounds or other property of e completed modification may be co	npanies for staking of the location of dist eplacement of modifications become the lamage, debris removal, clean-up, and lo	rmits and inspections. Before digging or exceptibution and service lines. Some lines are located responsibility of the homeowner. Homeowegal actions, which may occur by proceeding mpliance with all appropriate restrictions and	ocated in mer is g with thi
DESCRIPTION				
 Property plat p Plan view (from the first point of the first plan in the first plan	lan showing the location of the above) showing details and c	ls and dimensions/style of alterati anting materials used.	and property lines.	
Response Time				
takes no longer than (30) da	ys, from date of receipt. If you do n	ok season and contact homeowner regard ot hear back within 15 days please conta comprovements until the approval is		n usually
X		Estimated Start Date		_
Signature of Ho	neowner	Estimated Completion	on Date://	-
Please complete and ret	E-mail: westminister	owners Association Board of Directhology hoamacomb@gmail.com ww.westministerhoa.org/contact-		
	FOR AUTHORIZATION APP	ROVAL USE ONLY	Date: / /	
☐ Approved ☐ Deni Comments:	ed 🗆 Tabled 🗆 C	onditionally Approved	Board Authorization	_

Form: WM Rev. 02/21/2021