APPENDIX A

GARDEN VILLAGE PLANNED COMMUNITY ASSOCIATION CHANGE REQUEST FORM

Name of Applicant:	Date:
Telephone: (Day)	(Evening)
Email:	
	thirty (30) days to respond to your request.
Description of Proposed Change or N	<u> 1odification:</u>
A SKETCH OF THE PROPOSED ALT SEPARATE PIECE OF PAPER NOT LI DIMENSIONS NOTED.	TERATIONS MUST BE DRAWN TO SCALE ON A ESS THAN 8-1/2" X 11" WITH ALL PERTINENT
Approval of the request is granted w	
Request for approval is denied for th	ne following reasons:
BOARD OF DIRECTORS: Authorized Signature:	Date:
	PPROVAL OF THE BOARD OF DIRECTORS, THE R OBTAINING ANY APPLICABLE PERMITS FROM

Mail to: 975 Easton Road, Suite 102, Warrington, PA 18976