BROOKCLIFF PROPERTY OWNERS ASSOC. <u>MODIFICATION REQUEST FORM</u>

Complete the form and email to info@brookcliff.org

Dear Committee Members: 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:						
Nature of Modification: AREA:						
materials and colors plan contractor(s): Name: _ Phone:	hes, drawings and descriptions of the work including ned. Please include the following information about the contacts via both and email: CIRCUMSTANCES:					
acceptable materials and						
Phone #	Email:					
Date:	Email: Signature:					
Note: Please allow a m	inimum of 8 days for a response.					
Architectural Control Cha	irperson(s):Comments:					
Form#1, 2017-05021	Approvals:					