

Kingsbrooke of Palatine

ADDITIONS AND ALTERATIONS APPLICATION (KPC-411)

HOMEOWNER _____

DATE _____

ADDRESS _____

HOME PHONE _____

CELL PHONE _____

EMAIL ADDRESS _____

WORK PHONE _____

DESCRIPTION OF IMPROVEMENT _____

DIMENSIONS _____

SUPPLIER _____

APPROXIMATE COST _____

J.U.L.I.E. DIG # _____

Please be sure this addition conforms with any requirements set forth by the Village, County, State, etc. and that any necessary permits have been obtained prior to installation.

A sketch of all improvements including satellite dishes must be attached to the application to show location and dimension relative to existing structures.

As of the approval date of this alteration, I accept full responsibility for the altered area and will maintain it in a safe and presentable condition.

CONDITIONS: I agree to restore the affected area to its original condition prior to alteration condition at the time I sell my home before I am issued a closing letter from the Association (if required).

HOMEOWNER SIGNATURE _____

DATE _____

..... **FOR INTERNAL USE ONLY**

DATE RECEIVED _____

BY _____

DATE APPROVED _____

BY _____

REASON FOR DISAPPROVAL _____

FINAL INSPECTION BY _____

DATE _____

Date copy supplied to owner: _____ Sent via: email fax US mail

Please return to the Property Manager for Board consideration at the next meeting for the Board of Directors.