



Date Issued: \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

- \* Fences (materials, style, plat & sketch)
- \* Landscaping (species ID & sketch)
- \* Repainting (color changes and areas)
- \* Spas, Saunas, Pools (plan, style & sketch)
- \* Screening (type, elevation)
- \* Other (describe thoroughly)

- \* Structure Modification (plan with sketch)
- \* Structure Addition (plan with sketch)
- \* Tree Removal (sketch)
- \* Recreation Equipment (type, location)
- \* Antenna (type, elevation, location)

NOTE: *Attach all information required and sketch on back as noted above.*

The work is to be completed by \_\_\_\_\_ and time frame of project. \_\_\_\_\_.

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Received By: \_\_\_\_\_

Date: \_\_\_\_\_

Response: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date Responded: \_\_\_\_\_

Approved

Conditional Approval

Disapproved

Project Completed

In Compliance

Further Action Required

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Return Forms via:

Email: [BOgburn@cmacommunities.com](mailto:BOgburn@cmacommunities.com) (PREFERRED)

Fax: (404) 835-9233

Mail: Rolling Meadows HOA c/o CMA

1465 Northside Dr. NW Ste. 128 Atlanta, GA 30318