**The Common at Sinnott Farm, Inc.**

**Request for Alterations, Additions, or Improvements**

**REQUEST FOR APPROVAL FORM**

A Homeowner must provide the information requested below to the Bylaws/Covenants Committee c/o Westford Real Estate Management **PRIOR** to any work being performed on the exterior of the home*.*

**Owner Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date Submitted:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Owner Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone:** \_\_\_\_\_\_\_\_\_\_\_\_

**email:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Description of Requested Work:**  (Describe in detail the work to be done. Please attach sketches and drawings on separate page with measurements. Also include product data and/or photos, where appropriate.)

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The requested work will be done by: (Provide name and address of person who will actually perform the work, whether a private individual or contractor.)

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**NOTE:** Any person performing work will be required to demonstrate a professional level of ability to properly perform the work, must have the appropriate license(s) and Town permit(s) (which they may be required to obtain, and must provide a Certificate of Insurance. (Contact the Manager for more information.)

The owner acknowledges that if the request is approved, the maintenance of the added features is the sole responsibility of the owner. At the discretion of the Bylaws/Covenants Committee, the owner may be required to sign a Hold Harmless Agreement.

**Owner Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 (sign as appropriate)

APPROVED WITH CONDITIONS: Yes\_\_\_\_\_\_ (see attached) No\_\_\_\_\_\_

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

(sign as appropriate)

Explanation for Denial: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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For questions or other concerns, please contact: Diane Prescod

 rosecat415@yahoo.com