## LYNDHURST REQUEST FOR MODIFICATION REVIEW

Name _		Date
Full Mai	ling Address	
Home Phone		Office Phone
without l	the ACC with all information necessary to evaluate the Re limitation, the following information; site plan including a or sketches, and all other information required below or as	Il dimensions, color chips if applicable, list of materials
Descript	ion of Modifications Requested	
Start Dat	le	Completion Date
Adjacent	t Homeowners Contacted: All homeowners sharing a comed by, but are not binding upon, the ACC. No form will be	umon boundary line must sign. These signatures will be be considered unless this section is complete.
Signature	e Address	Approval: Yes No
	ach of the most common headings below, all items listed notes for other necessary information required for Modification.	
	Patio or Walkway Lot survey denoting location	List of materials to be used
	Exterior Decorative Objects  Description of object and location  Picture or drawing of object, and location	
<u> </u>	Gardens Location and size of garden	Type of plants to be grown
	Play Houses (See Guidelines for restrictions)  Location Materials	Size and sketch of picture
	Private Pool	D:
	Picture of pool-type Color (blue or white) Lighting Source	Dimensions Site plan Landscape plan
	Fencing (See Guidelines and Covenants for restrictions Picture/Drawing of fence-type Color Cors-beam structure	Dimensions Site Plan Materials to be used Posts anchored in concrete
· ·	Nails, aluminum or galvanized  Exterior Landscaping and Maintenance Landscape plan depicting plant materials an	