



LAKWOOD CROSSING AT HAMPSHIRE HOMEOWNERS ASSOCIATION ARCHITECTURAL IMPROVEMENT APPLICATION

Date of Application: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Lot Number: \_\_\_\_\_

Email: \_\_\_\_\_

Nature of Improvement (Be specific, including color & style): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Board Size (fence only): \_\_\_\_\_

Dimension (if applicable): \_\_\_\_\_

Construction Material (If applicable): \_\_\_\_\_

Supplier: \_\_\_\_\_

A DETAILED CONTRACTORS PLAN PLUS A SKETCH OF ALL IMPROVEMENTS ON YOUR PLAT OF SURVEY MUST BE SUBMITTED WITH THIS APPLICATION TO SHOW LOCATION AND DIMENSIONS. ARCHITECTURAL IMPROVEMENTS WILL NOT BE CONSIDERED WITHOUT THIS INFORMATION. IMPROVEMENTS MUST CONFORM TO THE LAKEWOOD CROSSING GOVERNING DOCUMENTS, AND TO LOCAL ORDINANCES.

I agree to abide by the rules set forth by the Association and accept full responsibility for all upkeep and maintenance of this improvement. I further understand that I must advise the purchaser of my unit, that he/she is responsible for the ongoing upkeep and maintenance of this improvement.

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

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

Approved: \_\_\_\_\_ Disapproved: \_\_\_\_\_

Reason for Disapproval: \_\_\_\_\_

Please mail completed application and requested documents to:

Lakewood Crossing at Hampshire HOA

C/O Firstservice Residential,

2541 Ross St., Hampshire, IL 60140

Email: Jennifer.lehmann@fsresidential.com

Please allow 30 days for Board review of your application.