

## Eclipse Community Management, LLC

P.O. Box 750310 Dayton, OH 45475 (513) 494-4049

(\$25 App Fee)

## ARCHITECTURAL IMPROVEMENT APPLICATION

Required for Fences, Sheds and Pools (in ground)

Owner Name:	Date:
Property Address:	
Home Phone:	Cell Phone:
Email Address:	
Describe the type and nature of the	thout your survey plat marked with location of fence/shed] proposed improvement (location, dimensions, color, etc.) ps, landscaping, play sets, solar panels, trash enclosures are NOT required
but must adhere to CTMOA CCRs.]	
City/Township may require additiona	al permit(s).
Anticipated Start Date:	Anticipated Completion Date:
reviewed or approves for engineering design Board of Directors, Management, Association thereof, or for any defect in any structure construction or install my proposed improvement to make any deviations whatsoever Association. I understand that the Association the approved plans and samples. I understand aesthetic requirements of the Association.	samples I am submitting are reviewed only on the basis of aesthetics and are not gn, and by approving such plans and specifications neither the Association, its on Members, Declarant, Reviewer, nor Agent(s) assumes liability or responsibility constructed from such plans or samples. I understand and agree not to begin ement until after I have received written approval from the Association. I agree from the approved plans without first for and receiving approval from the on may make a final inspection of the project on my property for conformance to and I am responsible to maintain my improvement(s) in a condition that meets the I understand that I must abide by all applicable local, state, or federal laws and taining any necessary approvals, permits, or licenses.
Owner Signature:	Date:
	(FOR ASSOCIATION USE ONLY)
Approved Approved with Stipulations Denied	Notes:
Name:	
Date:	

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