FORM 2

ROCKY RIDGE CONDOMINIUM ASSOCIATION MODIFICATION/IMPROVEMENT REQUEST

Name:	
Address:	
Phone:	Date of Request
	ress, please provide detailed information about the proposed changes. Include re, if available, and who will complete the work.
Please check any of the items	below that are applicable to this request:
Exterior lighting	Landscape lighting (front mulch beds; only black, bronze or silver)
Bird bath	Bird feederScreen/Storm doors (full view, black)
modification, this charge will	cape service contractor deems it necessary to charge more as a result of the pee assessed to the specific unit owner).
Satellite Dish (no larger	in diameter than 39.37"(one meter)Other
Estimated start date:	Estimated date of completion:
Detailed description: (Use rev	erse side or additional pages as necessary)
•	nts shall conform to existing design color and materials within the community. the followed. Permits, if required, must be obtained prior to any modifications.
REQUEST APPROVED:	REQUEST DENIED: DATE:
Signature (Board president):_	

This form can be transmitted via email or U.S. Mail to the Managing Agent. The address of the Managing Agent can be found on the front cover of this Handbook.