WINGHAVEN RESIDENTIAL OWNERS' ASSOCIATION

REQUEST FOR TRUSTEES' OR DIRECTORS' APPROVAL

This form MUST accompany all requests ARCHITECTURAL COMMITTEE MEETS ONCE A MONTH ON THE 1ST WEDNESDAY OF THE MONTH. REQUESTS MUST BE RECEIVED AT LEAST TWO DAYS PRIOR TO THE MEETING DATE.

Requests received after that will be reviewed at the next month's meeting.

Date	Lot # Subdivision
Owner (s)	Lot # Subdivision Phone
	Egy
Address _	Zip Code
This reque	est is for:
For consid	leration, all submissions must include the following information:
	of material used.
() Actual	l drawing of item with specifications/dimensions.
	lan showing the location of the proposed submission in relation to the home.
() A desc	cription as accurate as possible. Pictures and drawing (s) are always helpful.
1.	Please read your Indentures prior to submitting any requests. This can save both time and expense.
2.	Trustees' or Directors' approvals are based on style, type, size, and location of
	requested additions. Where any question (s) exist, the Indentures will be used
	as the determining guide, except in the case of Architectural Control
	Committees whose determination will be final.
3.	Under no circumstances do Trustees' or Directors' approvals indicate full
	authorization. All Homeowners submitting requests should get the necessary
	governmental (city and/or county planning and building commissions')
4	authorization for all planned work.
4.	If you proceed with work without getting all necessary approvals, you may be subject to legal proceedings as well as having to remove any unauthorized
	improvements.
5.	Formal written approval may take up to 30 days. Please allow enough time prior to onset of work.
6.	Construction identification signs such as those used by contractors and placed in
0.	the homeowner's yard are allowed only during the duration of the length of the
	project.
	Homeowner's Signature
E	Estimated start date: Estimated finish date: ure notified otherwise, this request form along with all pertinent information should be mailed to:
Unless you	u are notified otherwise, this request form along with all pertinent information should be mailed to: Community Managers Associates, Inc.
	Attn: Adrienne Petty
	14323 South Outer 40 Rd., Suite 301N
	Chesterfield, MO 63017
	Fax: 314-878-2773 Phone: 314-878-0025
	Or E-mailed to: apetty@cmamgrs.com
This reque	
co	ved Construction must commence and be completed within one (1) year from date of approval. If the instruction being approved is to address a violation, the resident shall have 30 days from approval to complete e project. Once construction is commenced, it shall be diligently pursued to completion.
	I If denied, the following are the reasons:
Board of T	Trustees/Board of Directors Date