

	For Reliance Management Only			
	Date Received:			
	Entered:			
	Date Sent for Review:			
	Date sent to Resident:			
	Community Manager:			
	Tracking Number:			
- 1				

PROJECT REQUEST FORM

Please fill out all lines, sign at the bottom and submit back to Reliance Property Management.

Name of HOA:							
							
Pnone Nu Email Ado							
				-			
		tion:					
	-	olished by Contractor					
Name an	d contact informa	ition of Contractor (if	applicable):				
Docarib	o the Tune of F	rojecti DIEACE CIVI	AC MALICII DETAI	II AC DOCCIDIE CUCH AC DIMENCIONIC COLOR			
		<u></u>		IL AS POSSIBLE, SUCH AS DIMENSIONS, COLOR			
				ructure such as a fence/shed/etc., please use the attache	<u>:d</u>		
grid pag	<u>e to draw your h</u>	ome and where you	plan to place th	ne structure in relation to your house.			
				tions the UOA committee will get on this request and provide	٠.		
			_	tions, the HOA committee will act on this request and provion dand agree to the following provisions:	ıe		
	•			<u> </u>			
				ze interference and inconvenience to other homeowners.			
5. I	assume all liability	and will be responsible f	or all damage and/o	or injury which may result from performance of this work.			
				pjects without the express written consent of the Board.			
				ractors, and employees who are connected to this work.			
	8. I will be responsible for complying with, and will comply with, all applicable federal, state, and local laws, codes, regulations, and						
	requirements in connection with this work. I understand and agree that the Homeowner's Association, its Board of Directors, its agent						
	and the committee have no responsibility with respect to such compliance and that the Board of Directors' or its designated committee's approval of this request shall not be understood as the making of any representation or warranty that the plans,						
				r governmental requirement.			
		Signa	ature:				
Committe	ee Members Com	ments:					
					_		
Committe	ee Approval:	Yes	No	With Conditions Listed Above (or Attached)			
Committee Signature: Date:			Date:				
				Date:			

Phone: 316-395-2165 Email: Cassandra.White@Reliance-Family.com

