

# SUNSET RIDGE TOWNHOMES

## Home Improvement Request

[Revised: 4/8/2016]

### GENERAL—

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (cell or home)  
Unit #: \_\_\_\_\_ Elk Head Range Road Email: \_\_\_\_\_

### PROJECT(S) [check as many as appropriate]—

- |  |  |
|--|--|
| <input type="checkbox"/> Central Air Conditioning System         | <input type="checkbox"/> Roll-up Garage Doors                          |
| <input type="checkbox"/> Courtyard Gate                          | <input type="checkbox"/> Skylights                                     |
| <input type="checkbox"/> Courtyard Screening (of iron grillwork) | <input type="checkbox"/> Storm/Screen/Security Doors                   |
| <input type="checkbox"/> Fence Replacement                       | <input type="checkbox"/> Window Replacement                            |
| <input type="checkbox"/> Front Entry Door                        | <input type="checkbox"/> Other (attached separate Project Description) |
| <input type="checkbox"/> Gutters & Downspouts                    |  |

### SCHEDULE—

Proposed Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Anticipated Completion Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### ACKNOWLEDGMENT—

Homeowner acknowledges that they have reviewed and accept the current Architectural Standard for the desired Home Improvement Project. Architectural Standards are available for download at: <http://www.sunsetridgetownhouse.com/7.html>. It is the Homeowner's responsibility to perform work which meets or exceeds the related Standard and, if hiring a Contractor for the desired work, to provide a copy of the related Standard to the Contractor.

**DO NOT START WORK PRIOR TO RECEIVING WRITTEN APPROVAL FOR THE REQUESTED IMPROVEMENT.** The maximum time allowed for completion of the work is 1 year from Date of Approval.

### SUBMITTED—

I understand and will comply with the conditions above.

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Homeowner

After review of related Standard(s), completion of this form and preparation of required documents, submit complete package to WSPS. Email: [phil@wsp.net](mailto:phil@wsp.net). Mail: 9145 E Kenyon Ave, #100, Denver, CO 80237.

### ACTION TAKEN—

\_\_\_\_ Approved \_\_\_\_ Conditionally Approved\* \_\_\_\_ Disapproved\* [\*See attached conditions/rationale]

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Board of Directors/Managing Agent

Project Reference # (if approved)\*: AR-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_  
[\*AR-Unit #-Year-Month-Day]