## **IMPROVEMENT APPLICATION**

An Application form must be submitted for every exterior change, including, but limited to: planting or removing flowers, shrubs, or trees, changes or additions to fences, new windows, entry doors, garage doors, storm doors, or patio doors, patio or deck improvements, and improvements to existing structures. If there are any questions, contact Apple Property Management, LLC at 937-291-1740.

## WHAT ARE THE OBJECTIVES OF THIS FORM?

- 1. To ensure that a proposed change/improvement conforms to the Association's Declaration, enhances the beauty of Hilltop maintains the architectural harmony of Fox Hill, and does not inconvenience other property Owners in Hilltop.
- 2. To enable the Association to determine what information and assistance it can provide to expedite completion of the proposed project.

DATE:	DAY TIME TELEPHONE:
NAME:	
ADDRESS:	
OWNER:YES	SNO (IF RENTED, OWNERS TELEPHONE):
OWNER'S NAME:	
DESCRIPTION OF P	ROPOSED
CHANGE/IMPROVE	EMENT:
LOCATION:	APPROXIMATE COST:
DIMENSIONS:	COLOR:
MATERIALS:	
START DATE:	COMPLETED DATE:
	ALE SHOWING THE EXACT LOCATION AND DIMENSIONS OF THE PROPOSED CHANGE/IMPROVEMENT
	ED TO THIS APPLICATION.)
	ules concerning the proposed change/improvement. This change/improvement shall in no way ghbor's limited common area or common ground. I agree to abide by the rules established by the

encroach on a neighbor's limited common area or common ground. I agree to abide by the rules established by the Association and will be solely liable for any upkeep required by the construction of this change/improvement. I further agree to obtain all licenses and/or building permits and to meet all legal requirements for building codes and inspections. All work approved must be completed within 6 months of the dated approval from the association. If work is not completed within 6 months a new application must be submitted.

SIGNATURE (S):		
	FOR ASSOCIATION USE ONLY	
Date Approved:	Received:	
Special details or provisions for ap	proval:	