

PARKWAY VILLAS CONDOMINIUM ASSOCIATION

Miscellaneous Request Form

Please state the specific request:

Draw diagram if needed

SUBMITTED

Owner Signature: _____

Address: _____

Date: _____

Copy of approval Received by owner

Owner Signature: _____

Date: _____

Conditions of Approval (if any):

BOARD APPROVAL

(Requires at least 4 Signatures, Phone or emails)

Signature	email	Phone
-----------	-------	-------

1. _____	()	()
----------	-----	-----

2. _____	()	()
----------	-----	-----

3. _____	()	()
----------	-----	-----

4. _____	()	()
----------	-----	-----

5. _____	()	()
----------	-----	-----

6. _____	()	()
----------	-----	-----

7. _____	()	()
----------	-----	-----

Approval by the Association after completion: _____

Applicable Board Member