

THE VILLAS AT LONDON SQUARE

APPLICATION FOR IMPROVEMENT OR REQUEST FOR REPAIR

Name _____

Address _____

Phone Number _____ **Submission Date** _____

Please describe your request below with as much detail as possible. Include drawings, measurements and specifications when possible or appropriate. You may return this form to: Tom Meister, 4516 Amberidge Ave NW, Canton, OH 44708. His phone # is 330-327-7691.

Date received _____ **Date approved or disapproved** *(circle appropriate)* _____

Approved/disapproved by *(circle appropriate)* _____

Date _____ **Approved by** _____ **with the following conditions:**

Date _____ **Approval pending by** _____ **The following information is needed.**