

DATE: \_\_\_\_\_

SHELTON PLACE OWNERS ASSOC.  
APPLICATION FOR ALTERATION APPROVAL

\*NO ALTERATIONS MAY BEGIN UNTIL APPROVAL IS GRANTED\*

1. \_\_\_\_\_  
Name of homeowner requesting approval (please print) Phone number (s)

2. \_\_\_\_\_  
Address of home where alteration will occur

3. \_\_\_\_\_  
Mailing address of homeowner (If different than above)

4. Type of alteration:  
Landscape \_\_\_\_\_ Building Exterior \_\_\_\_\_ Other (Please specify): \_\_\_\_\_

5. Location of alteration in or around your home:  
\_\_\_\_\_ Front \_\_\_\_\_ Side \_\_\_\_\_ Rear

Other  
If other, please specify: \_\_\_\_\_

6. Scope of Alteration - Please explain in detail what you are requesting permission to do - include approximate dimensions if appropriate:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Materials to be used - Describe the type of materials (or shrubs) to be installed and/or removed and quantities of each material:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Effect on the Existing Area: Explain if any existing elements will be affected by this alteration (will existing shrubs be moved, or part of existing porches be dismantled, etc.) Please indicate the change in size of the existing element's footprint, for example, the patio will expand by 2 ft. on the left and 4' in the back.)

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9. Effect of alteration on neighbors to either side of your home:

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10. Signature of nearby unit or landowner(s) signifying that, as a courtesy, the nearest properties have been made aware of this alteration request.

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NOTE: If you are unable to obtain the signatures of one or both of your neighbors, you must explain the reason below:

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11. **If applicable, please attach a drawing showing all existing elements, including shrubs and porches in solid lines and proposed alterations in dotted lines. Include the first three feet of your neighbors' homes and yard in the drawing. Show distance from nearest existing elements to proposed additions or alterations.**

12. If digging is involved, please contact: PA One Call at (800) – 242 – 1776 at least three (3) working days before digging

13. For local infrastructure coverage, Pitell Contracting should be contacted and note:

\_\_\_\_\_  
Date                      Time                      Name of Pitell Representative who provided clearance

14. Expected start date: \_\_\_\_\_ Completion date: \_\_\_\_\_

15. Additional Notes: \_\_\_\_\_

14. \_\_\_\_\_

Signature of homeowner requesting approval

**Please attach drawings, pictures, etc. to this form.**

APPLICANT: PLEASE DO NOT WRITE BELOW THIS LINE.

\_\_\_\_\_

Approved By: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_