

# WILLOWBEND COMMUNITY ASSOCIATION, INC.

*A Corporation Not-for-Profit*

## NEIGHBOR'S PERMISSION

**This is to certify** that the undersigned has obtained permission from my adjoining neighbor(s) to undertake

\_\_\_\_\_ Name of Requested Project on Associated ACR form

requested at my residence \_\_\_\_\_

Homeowner's Address on ACR form

Adjoining Neighbor No.1

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_

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

Adjoining Neighbor No.2

If Applicable

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Signature: \_\_\_\_\_

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

\* \* \* \*

**I acknowledge my full financial responsibility** to restore to original condition the property of my neighbor(s) and the common property of the Association in the event of any damage to either personal property or that of the Association (e.g., but not limited to, landscaping, irrigation etc.). As necessary, I agree to timely coordinate with the Property Manager for the use of designated contractor firms to accomplish corrective work to Association property.

\_\_\_\_\_ Homeowner's Name, printed, as it appears on the Associated ACR form

\_\_\_\_\_ Homeowner's Signature

\_\_\_\_\_ Date

Please attach this form to the associated Architectural Change Request (ACR) form and submit to the Property Manager's Office.

**Proponent:**  
Architectural Review Committee

**Neighbor's Permission**  
November 2006