

HOMEOWNER CONTACT INFORMATION	
Homeowner(s) Signature:	
Name:	
Street Address:	
Home Phone:	Work Phone:
Lot:	Block:
Close of Sale Date:	

The attached plans were made available to the following neighbors for review			
Impacted Neighbor		Impacted Neighbor	
Name:		Name:	
Address		Address:	
x		x	
Signature	Date	Signature	Date
COMMON AREA OR BACK YARD—REAR OF RESIDENTIAL SITE			
Adjacent Neighbor		Adjacent Neighbor	
Name:		Name	
Address		Address	
xx		x	
Signature	Date	Signature	Date

My neighbors have seen the plans I am submitting for the Design Review committee review (see above verification). I, as the applicant, certify that I have requested that my neighbors sign this statement confirming notification. I understand neighbor objections do not cause denial of the plans.

Submitted By

Name:

Date:

Address:

Professionally managed by
 MSI, LLC
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