Cedar Ridge Homeowners Association Inc.

VARIANCE REQUEST

Return or Fax to:	Requested By:	
Woodbridge Group	Name:	
PO Box 237	Address:	
Pittsford, NY 14534	Phone:	
FAX: 585-385-4693	Date:	
E-Mail: Service@woodbridg	egrouppro.com	
area of the community. I have	the following changes to the attached a sketch of propo	the exterior of my townhouse or to the common posed changes, listed materials to be used, etc.
Reason for request:		
Length of Guarantee (if appli	cable):	
Indicate future maintenance r	equired by the Association	n:
Name of contractor (company	y) who will do the work: _	
Contractor's certificate of i	nsurance is attached or o	on file with HOAYesNo
4	9	n all damage caused by the proposed change. Date:
	For Board of Di	irectors Use
*Approved*A	pproved with Conditions (s	(see attached) Disapproved
Date: Signature:		
Latest completion date after v necessary: Comments on final inspection	• ••	omatically revoked and a new variance request is nd/or Property Manager:
	vill will not be	ecome the responsibility of the unit owner as it