



SUMMER LEA

**COMMUNITY ASSOCIATION
REQUEST FOR PERMIT**

Name: _____

Date: _____

Lot No.: _____

Address: _____

Tele. No.: _____

Description of Permitted Act:

Anticipated Dates: Start _____

Finish _____

Owner(s) Signature

.....
Decision:

Date: _____

Granted

Denied

Denied with Suggestion of
Appeal upon Supplementation

Board of Director Signature