



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

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

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

I am requesting to make the following alterations to my home:

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

The following request has been:

Approved

The above request has been approved. You will have to do the following to bring the home back to its original condition: \_\_\_\_\_

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

If the alteration is not restored to its original condition the following charges will apply:

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

Not approved

Reason: \_\_\_\_\_

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

\_\_\_\_\_  
Resident Date

\_\_\_\_\_  
Authorized HP Representative Date