

**TWIN LAKES OVERLOOK HOMEOWNERS' ASSOCIATION, INC.
SIGN DISPLAY REQUEST**

Name _____ Property Address _____

Phone _____ Email _____

Description: (Please print or type)

Type of signage: _____

Length of time requested for sign to be on display: _____

Reason: _____

Signature of Homeowner _____ Date _____

SUBMIT COMPLETED APPLICATION AND A PICTURE OF PROPOSED SIGNAGE BY MAIL OR EMAIL TO:

TWIN LAKES OVERLOOK HOA
c/o Coventry Group Community Management, Inc.
P.O. Box 2580
Winchester, VA 22604

LNOKES@COVENTRYGRP.COM

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BOARD OF DIRECTORS USE ONLY:

Your request for the above sign has been:

DATE RECEIVED

- Approved without exception
- Approved with the following terms and conditions: _____
- Denied for the following reason(s): _____

Lisa Nokes, CMCA

Date Approved