

Date _____

WINDEMERE HOMEOWNERS ASSOCIATION
PLAN REVIEW COMMITTEE
VARIANCE REQUEST AND DISPOSITION DOCUMENT

Variance requested by: _____

Homeowner address _____

Homeowner Lot # _____

Homeowner telephone # _____

Description of variance requested _____

Variance granted? ____ Yes ____ No

Justification for acceptance or rejection of variance (Trustee use only)

Signature _____

Gerald Cox, Chairman
Plan Review Committee

