

EXHIBIT A

**The Pines Townhome Association
Application for Approval of Alteration**

Date: _____

Type of Alteration (Check One): Landscape Structural Other

Name of Owner: _____

Address: _____ Unit Number: _____

Home Phone: _____ Work Phone: _____

Detailed Description of Alteration: _____

(Attach drawing of proposed alteration.)

Contractor who will do work (if applicable):

Name:

Address:

Phone:

Please send this application to :

**MANAGEMENT REALTY PARTNERS
2704 GRAND AVENUE
WAUKEGAN, ILLINOIS 60085
(847) 244-0100**