



Kenmure

**KENMURE ARCHITECTURAL REVIEW COMMITTEE (an Operating Committee of)
KENMURE PROPERTY OWNERS ASSOCIATION**

TREE CUTTING & SHRUB REMOVAL REQUEST

Address: _____

Property Owner: _____ Phone/email: _____

1. Owner's Tree Cutting/Shrub Removal Request: _____

2. Diagram:(To be drawn by KARC representative only)

APPROVED: YES NO

THIS APPROVAL APPLIES ONLY TO THE SCOPE OF WORK PRESENTED ABOVE; ANY ADDITIONS OR CHANGES MUST BE APPROVED BY KARC.

DATE: KARC APPROVAL _____ By: _____ (KARC Representative)

CONDO ASSN. _____ By: _____ (if necessary)

(Signature of OWNER)

I agree to do work in accordance with the above Approval: _____

(Tree Service Signature)