

**LAKEWOOD PRAIRIE HOMEOWNERS ASSOCIATION ARCHITECTURAL IMPROVEMENT APPLICATION  
AND REVIEW FORM**

Date of Application: \_\_\_\_\_

Homeowner: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Nature of Improvement: \_\_\_\_\_  
\_\_\_\_\_

Location: \_\_\_\_\_

Dimension (if applicable): \_\_\_\_\_

Construction Material (if applicable): \_\_\_\_\_  
\_\_\_\_\_

Installer/Contractor: \_\_\_\_\_

**A REPRESENTATIVE DRAWING OF ALL PROPOSED IMPROVEMENTS MUST BE DRAWN ON THE PLAT OF SURVEY WITH LOCATION AND DIMENSIONS.** As of the approval date of this alteration, I accept full responsibility for all upkeep of the altered area and agree to maintain it in a safe condition.

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

**Application will not be valid unless signed**

Sketch of improvement is attached: YES NO

Plat of survey is attached: YES NO

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for Disapproval: \_\_\_\_\_  
\_\_\_\_\_

**Please submit your application along with the proper documents to:**

**Submit the completed form to:**

**Lakewood Prairie Homeowners Association  
c/o Retro Community Management  
3755 E. Main Street, Suite 130, St. Charles, IL 60174  
or email: [customercare@retrocmweb.com](mailto:customercare@retrocmweb.com)**