

Pine Tree Village Landscape/Mailbox Request (Ticket)

Type (Check Box): Request Problem Change

Type (Check Box): Landscape Mailbox Sprinkler (Place a flag by sprinkler)

Name: _____

Date: _____

Address: _____

Unit: _____

Location of Request facing your home (Please circle): Front, Rear, Left or Right.

Activities that require excavation Call 811 prior to any work. If using a contractor, supply their Insurance, License and any County permits required. I agree and abide by PTV Declaration of Covenants, Conditions, and Restrictions.

Telephone #: _____

Email: _____

Request (Please include Drawing, Layout and Pictures if applicable):

Committee Reply: Date: _____ Approved Rejected

Committee Chair _____ Date: _____

President _____ Date: _____

Retain Pink copy, submit white and yellow to the office.

Once approved work can begin work.