

GREENWOOD HOMEOWNERS ASSOCIATION
c/o Cardinal Management Group, Inc.
5900 Prince James Drive
Springfield, VA 22152

NOTIFICATION FORM FOR SATELLITE DISH INSTALLATION

NAME: _____

ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____

INSTALL DATE: _____

TYPE OF
DEVICE: _____

DESCRIPTION OF (Size, color, manufacturer, etc.)
DEVICE

INSTALLATION LOCATION: (Check one of the following preferred locations)

Inside window _____

Ground level in the rear yard screened with landscaping _____

Ground level in the rear yard entirely within and below the height of an approved fence which fully encloses the rear yard _____

Rear side of the roof with its highest point below the peak of the roofline, preferably as close to the chimney as possible _____

Above the walking surface off a railed deck, no portion extending more than six (6) inches above the rail _____

Attached to the outside of the back railing of the deck, provided that no portion of the device is higher than six (6) inches above the height of the railing _____

IF NOTIFICATION IS BEING PROVIDED FOR INSTALLATION IN A LOCATION OTHER THAN THOSE PREFERRED BY THE ASSOCIATION, PLEASE PROVIDE A DETAILED DIAGRAM SHOWING THE INSTALLATION LOCATION AND A DESCRIPTION OUTLINING THE REASONS WHY ALL PREFERRED LOCATIONS ARE UNACCEPTABLE ALTERNATIVES.

OWNERS SIGNATURE: _____ DATE: _____

MAIL TO THE ABOVE ADDRESS