

Saddle Ridge Estates Association

Project Request

599 Saddle Ridge ☆ Portage, WI 53901

Phone: (608) 742-6850

www.saddleridgeestates.net

All requests shall be made in writing.

Emergency? Contact board members directly followed up with a written request.

Unit Owner Name(s): _____ Date: _____

Unit #: _____ Phone #: _____ Email: _____

Describe the project in detail:

Attach additional sheets to include detailed drawings and materials to be used, if needed.

**** SREA Board, Building Director, or Grounds Director Use ONLY ****

Date Request Received: _____ Date of Site Review: _____ Person Doing Review: _____

Unit owners will be notified within 10 days by phone or email that the project has been reviewed.

Project to be paid by: Owner Insurance SREA

Board Decision, when necessary: Approved Denied Date: _____

Building or Grounds Director: Approved Denied Date: _____

Date Unit Owner Notified: _____ By: _____

Explanation of Decision: _____

Please keep a copy of the completed form for your records.

Mail or drop off in the 599 Saddle Ridge mailbox or email it to saddleridge139@gmail.com.