

ARC SATELLITE DISH REQUEST FORM

Date Submitted:	_
Lot Owner Name:	
Lot Address:	
Phone: Em	nail:
	I hereby submit this request for your review for the unit. I agree to the following terms and conditions:
 The satellite dish will be installed on the otherwise stated in writing from the Ar 	ne roof next to the builder installed junction box unless ochitectural Review Committee.
I will be responsible for any damage ca but not limited to roof leaks.	used by the installation of the satellite dish including
damage repaired by a contractor specif failure to remove and repair damage m	agree to have the satellite dish removed and roof fied by the Board, at my sole expense. I understand tha ay result in a Limited Assessment as allowed for in ration of CC&R's for Barber Station Townhomes.
4. I agree that there will be no more than	one satellite dish on my dwelling unit.
Note: Only attic antennas are permitted	d
Print Name	Signed
Print Name	Signed
Return form to: Brighton Corporation Attn: Tammy Kinsey 12601 W. Explorer Drive, Suite 200, Boise, ID tkinsey@brightoncorp.com 208-378-4000	83713
Approved Date	Un-Approved Date
Park Place at Barber Park Representative	