

Plant Specification: (If Applicable)

Common/Botanical Name: _____

Type: Tree Shrub Perennial Annual Groundcover

Mature Height: _____ feet **Mature Spread:** _____ feet

Light Requirements: Full Sun Partial Shade Full Shade).

Soil Requirements: _____

Water Requirements: _____

Maintenance Needs: _____

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Owner's Acknowledgments:

I understand...

1. ...all requirements and rights stipulated in *Chapter 2: Common Elements; Landscape* of the Crest of Wickford rules, regulations, and guidelines concerning modification, maintenance, and appearance of the condominium.
2. ...that a copy of this application will be returned to me after review of the Architectural Control Committee.
3. ...that any variation from the original application must be resubmitted for approval.

Owner / Applicant Signature: _____ Date: _____

Co-owner / Applicant Signature: _____ Date: _____

FOR COMMITTEE USE ONLY:

Date Received: _____

Approved. Disapproved

Date: _____

Comments: _____

Reviewer: _____

Date: _____