## SKYBROOK RIDGE TOWNHOMES COMMUNITY ASSOCIATION ANTENNA PLACEMENT NOTIFICATION FORM

Date: Submitted	Received:
Name	_Phone: (h)(w)
Physical Address:	
Email Address:	

(I)(We) wish to notify you that a covered antenna is being installed on my property in accordance Policy Resolution No. 1 of Skybrook Ridge Townhomes Community Association, Inc. Specific information regarding this installation is provided below:

1. TYPE OF ANTENNA:	Direct Broadcast Satellite Antenna (DBS)
	Multipoint Distribution System Antenna (MDS)
2. MAST:	YesNo Height of mast <b>above roof line:</b>
	feetinches
	Height of mast:feetinches
	Distance to property line:
	feet inches
3. LOCATION:	Rear Yard Side YardRear Patio On Ground Roof at Drip Edge Roof Below Ridge Line
	Other (Describe)
4. SCREENING:	Yes No Partial

(I) (We) have read the Association's Antenna Placement Guidelines and will install (my) (our) antenna in compliance with such Guidelines. If (my) (our) antenna installation does not comply with the Guidelines,
(i) (we) will relocate or reinstall the antenna at (my)(our) expense to comply with the Guidelines provided that compliance does not preclude reception of an acceptable quality signal or impose an unreasonable expense.

**NOTE:** A non-compliant request for an exception to these requirements, should be made through the Architectural Review process.

Signature\_\_\_\_\_

Return to: Key community Management, Inc. 1201 Stallings Road, Matthews, N.C. 28104 Phone: (704) 321-1556 Fax: (704) 321-1552 Email: janis@keycmi.com