

Westchester Place Homeowner Association
c/o Associa Chicagoland
1827 Walden Office Square, Suite 200
Schaumburg, IL 60173
Phone: 847-490-3833 Fax: 847-490-9807

Email: helpmechicagoland@associa.us

WIDEN DRIVEWAY Modification Request Form

The driveway of my unit at _____ is being replaced. I have arranged with the contractor to widen my drive by _____ inches. I shall be responsible for all additional costs incurred by this widening.

This additional width will generally not exceed nine (9) inches on any one side of a driveway BUT is dependent upon other factors including property line and alignment with the end of the garage. (The contractor will determine the allowable space for your quote.)

My agreement with the contractor is attached. I request approval for this modification and agree to the above conditions.

Signed: _____

Print Name: _____

Date Submitted: _____

Date Received by Associa: _____

Return this completed form and attachments to Associa at the address printed at the top of this page

ACC Approval: _____

Date Received by ACC: _____

Date Approved: _____
