EL DORADO WAY CONDOMINIUM ASSOCIATION REQUEST FOR APPROVAL TO INSTALL "NON-CONFORMING ANTENNA"

THIS FORM MUST BE FILLED OUT FULLY AND COMPLETELY (ATTACH ADDITIONAL PAGES AS NEEDED), AND MUST BE DATED AND SIGNED. PLEASE PRINT OF TYPE (EXCEPT SIGNATURES). MAIL OR DELIVER COMPLETED FORM TO ON-SITE MANAGER'S OFFICE.

Owner(s) Name:			/Unit No.:	
If Rental, Tenant(s)	Name:			
Owner Telephone Work:	Home:	Mobile:	E-Mail:	
			E-Mail:	
Type of Antenna (Check One):	□ MMDS (wi	dcast satellite "dish" ireless cable) antenna dcast television antenna ase specify:		
Antenna Size:		Mast Size:		
Company Installing	Antenna:			
Address:		Telephone:		
Date Installation is to Start:		Finish:		
Antenna Location:				
Please state each re Condominium Asso	equirement of Ru		Regulations for El Dorado Way will not be met, and as to each	
caused by, and any occurs due to, anten	damage to any co na installation, n	mmon elements, the own	bility and liability for any injury er's unit and any other unit that	
Tenant's Signature(s):				