**Building Permit Issued by  
North Shoreland Property Owners Association**

Name of owner:

Address:

Phone # E-mail

I am applying for a permit to do the following:

Who will do the work? Contactor phone #

Have you read the subdivision Declaration of Restrictions approved in 2016?

Does this proposal meet the applicable restrictions?

If not, describe the variance:

Does this request involve the construction of free standing garage or storage building?\_

Does the request meet property line, square footage and height minimums?

When do you plan to start work? Estimated completion date

Applicant Signature Date

**Approval of NSPOA Board of Directors**

President

Additional Board Member

Board Comments:

***Permit Number Date***

**Note: Construction must begin within 6-months of date of permit approval.**