

# SP II HOMEOWNERS ASSOCIATION

## COMMON AREA LANDSCAPE MAINTENANCE REQUEST

NAME \_\_\_\_\_ WORK PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ HOME PHONE \_\_\_\_\_

DATE \_\_\_\_\_

Provide location and description of item(s) and/or areas requiring attention.

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PLEASE RETURN YOUR REQUEST TO:      BARBARA ORVIK  
ACCORD MANAGEMENT

PLEASE DO NOT MAKE REQUESTS TO A LANDSCAPERS DIRECTLY. IN THIS WAY WE  
CAN MANAGE THE WORK MORE EFFECTIVELY AND EXPEDITIOUSLY. THANK YOU.

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