

# FOX RUN LANDSCAPE PLANTING REQUEST

Any changes to front or back foundation plantings must first meet Landscape Committee/Board approval. This applies to changes at Association *and* homeowner expense. For responsibility guidelines, please consult the Fox Run Chart of Responsibilities. Homeowners initiating landscaping work at personal expense are required to submit a detailed request form that includes specific plants/design. Request forms are not required for planting annuals, perennials, and seasonal bulbs in existing unit beds. Contact the Landscape Committee or a member of the Board of Directors with any questions. Submit this form to Shew Community Management. Thank you.

Unit #: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

## REQUEST (Please check all that apply):

### Unit front/Common area:

\_\_\_\_\_ Dead tree/shrub removal

\_\_\_\_\_ Placement of tree in common area

\_\_\_\_\_ Removal/replacement of foundation tree/shrub

\_\_\_\_\_ Permanent plantings

\_\_\_\_\_ Other (explain): \_\_\_\_\_

### Unit back/Common area:

\_\_\_\_\_ Addition of beds/landscaping

\_\_\_\_\_ Removal/replacement of back bed plants

\_\_\_\_\_ Placement of tree in common area

\_\_\_\_\_ Other (explain): \_\_\_\_\_

**FOX RUN LANDSCAPE COMMITTEE  
PLANTING NOTIFICATION**

Unit #: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

At the Landscape Committee's recommendation, the Board of Directors has approved the following landscape changes to your unit or the common area near your home. All suggestions were made with input from the community landscape contractor. If you have any questions, please contact the Fox Run Board of Directors (through Shew Community Management; 610-431-3436) or a member of the Landscape Committee. Thank you.

Unit front/Common area:

Work scheduled: \_\_\_\_\_

Reason for work: \_\_\_\_\_

Unit back/Common area:

Work scheduled: \_\_\_\_\_

Reason for work: \_\_\_\_\_

The work should take place within the next:

\_\_\_\_\_ Days/Weeks

\_\_\_\_\_ Season

\_\_\_\_\_ To be determined

**FOX RUN LANDSCAPE COMMITTEE  
REQUEST RESPONSE**

Unit #: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

The Fox Run Landscape Committee has reviewed your request for landscape work, with the following result:

\_\_\_\_\_ Approved. Immediate; work should take place as soon as possible

\_\_\_\_\_ Approved. Intermediate; within 1 year as funds become available

\_\_\_\_\_ Approved. Long-range plans

\_\_\_\_\_ Approved. Work completed at homeowner's expense

\_\_\_\_\_ Approval denied. The Committee is sorry that it cannot approve your request.

Comments:

---

---

---

---

---

---

---

---

---

---