



TRAVERSE MOUNTAIN MASTER ASSOCIATION

**NOTICE OF COMPLETION**

**Please fill out and return this sheet once the work is complete.**

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

Property Address: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_ COE or Possession of Home: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_

On the \_\_\_\_\_ day of \_\_\_\_\_ the Minimum Rear Yard Landscaping requirements were completed in accordance with approved plans by the TMARC which includes:

- Sod / Plantings
- Rear Property Fencing
- Grading, all drainage is retained on the lot

On the \_\_\_\_\_ day of \_\_\_\_\_ the Improvement(s) on the described Property was (were) COMPLETED in accordance with the plans and submittal package, which was approved by the TMARC on \_\_\_\_\_ (date)

(Please list) The completed Improvement(s) is (are): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Owner(s) \_\_\_\_\_ Date \_\_\_\_\_

**TMARC or Compliance Officer Use Only (NOTES):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_