

LEISURE LAKE MEMBERSHIP ASSOCIATION

BUILDING PERMIT

Member Name: _____ Lot No. _____

Project Start Date: _____ Project Completion Date: _____

Scope of Project: _____

LLMA BOD SECTION:

Member in good standing? _____ YES _____ NO

Is the lot laid out in compliance with the State of Ohio guidelines? _____ YES _____ NO

Has a diagram of the structure and location been submitted for approval? _____ YES _____ NO

APPROVED: _____ YES _____ NO

LLMA Buildings Trustee: _____ Date: _____

LLMA Grounds Trustee: _____ Date: _____

Comments: _____
