

**CHELSEA WOOD CONDOMINIUM  
WINDOW REPLACEMENT REQUEST APPLICATION**

DATE RECEIVED: \_\_\_\_\_

OWNERS NAME: \_\_\_\_\_  
Print

Signature

ADDRESS: \_\_\_\_\_

HOME TELEPHONE #: \_\_\_\_\_

DAY TELEPHONE #: \_\_\_\_\_

**NOTE TO APPLICANT:** Mail or deliver your completed application and any samples/exhibits to the Chelsea Wood On-Site Office at 8445-TI Greenbelt Road, Greenbelt, MD 20770. Once approved you will be notified in writing. Note: You have six months from date of approval to complete the project or you will have to resubmit application for approval.

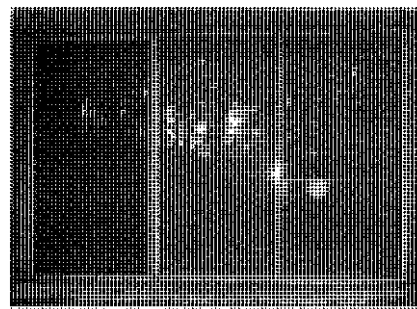
Fill out the section below that applies to your request.

**Patio/Balcony Door Replacement**

1. From brick wall to brick wall fill in the width of the patio opening: \_\_\_\_\_
2. From floor to ceiling height fill in the height of the patio opening: \_\_\_\_\_
3. Fill in the size of the proposed patio door: \_\_\_\_\_
4. Fill in the color of the exterior window frame: \_\_\_\_\_
5. Attach a picture of the proposed replacement to this application.
6. Please note contractor's name, expected start and completion date.  
\_\_\_\_\_

**Sample of approved door**

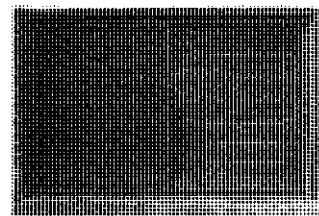
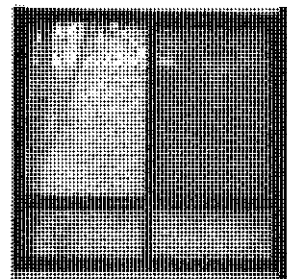
Door size = 12' x 8'



**Window Replacement**

1. Note which windows will be replaced: \_\_\_\_\_
2. Fill in the width measurement of the proposed replacement window: \_\_\_\_\_
3. Fill in the height measurement of the proposed replacement window: \_\_\_\_\_
4. Fill in the color of the exterior window frame: \_\_\_\_\_
5. Attach a picture of the proposed replacement to this application
6. Please note contractor's name, expected start and completion date.  
\_\_\_\_\_

**Sample of approved windows**



Recommended Approval ( )

Recommend Disapproval ( )

Date \_\_\_\_\_

Management Agent,

Approved ( )

Disapproved ( )

Reason for disapproval \_\_\_\_\_

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

\_\_\_\_\_  
President, Board of Directors