**Architectural Change Request Form**

**Name:** **Date:**

**Address:**

**Phone: E-mail:**

**Description of Improvements:**

 Pictures of proposed materials attached

 Contractor information including license # and insurance attached

I will assume the responsibility for any work under the above proposed improvement that I or my contractor accomplish, which may, in the future adversely affect the common area. I will assume responsibility for all future maintenance of this addition or improvement.

 **Homeowner Signature**

The undersigned adjacent homeowners have no objection to the proposed improvements:

**Unit #:** **Signature:**

**Unit #:** **Signature:**

NOTICE TO OWNERS: Your proposed improvements may require a permit from the building department. You or your contractor should check with the building department about permit requirements before starting any work. No work should be done which may change the existing drainage patterns.

**Date of Board Approval:**

**Board Member Signature:**