

Island Village Condominium Association

Unit Modification Request Form

Date: _____

Unit #: _____

Name: _____

Address: _____

Phone #: _____

Briefly describe the proposed change:

.Attach specifications and plans if appropriate.

Project Schedule:

Work will be done by: _____ Owner _____ Contractor

Contractor Name (if applicable) _____

Indicate the approximate time needed to complete the project after Board approval.

_____. Expected Start Date: _____

Please indicate any building permits that will be required. Owner is responsible to check applicable ordinances.

We hereby acknowledge that I have read and understand the Declaration of Condominium and By-Laws of Island Village Condominium Association. We understand that if this request is approved by the Board of Directors, we (a) may have to apply to the appropriate governmental agency for any required building permits; (b) we must comply with all applicable building codes, requirements, etc. in the construction of our improvements; and (c) construction may not start until an approved copy of this request is received by the Association. We further understand and agree that approval of this request may be withdrawn if the improvement; (a) is not constructed exactly as it has been approved. All owners must sign this request. We also understand that we will be responsible for all costs associated with this alteration including all future maintenance costs, and the costs associated with an owners meeting for approval.

Owner Signature

Owner Signature

DO NOT WRITE BELOW THIS LINE

Board Approval () Approved as submitted
() Deferred (stated in comments)
() Approved with conditions (stated in comments)
() Denied (stated in comments)

Board Signature: _____ **Date:** _____

Comments: _____

