

Application for Architectural Improvements

OWNER INFORMATION				
NAME				
CONDOMINIUM UNIT NUMBER		_		
PHONE NUMBER		_		
PROPOSED IMPROVEME DESCRIPTION (ATTACH PLANS)	NTS	_		
I understand that my proposed improvemen obtain all required permits before commenc				
I will assume the responsibility for any work adversely affect adjacent properties. I will as				
Upon approval of architectural improvement hours prior to commencement of construction		oility of notifying unit occup	pants above, l	below and on each side of my unit, 72
OWNER'S SIGNATURE				
		_		
FOR OFFICE USE ONLY				
DATE RECEIVED	REVIEW DATE		DECISIO	N DATE
DECISION LETTER SENT ON		□ APPROVED □	DENIED	☐ CONDITIONAL APPROVAL
COMMENTS		_		