

Master Modification Form

Modification Request

January 30, 2019

Request Type: Building ()	Landscaping ()	Both ()	
Submit your request to the Board mem	ıber responsible for I	Buildings and/or Land	scaping.
Owner:		Date:	
Address:		Phone:	
Modification requested (Be specific. In	clude pictures and/or	drawings):	
Reason for Request:			
Who will do the work?			
Who will bear the costs?	Owner ()	Association ()	
Does this affect another co-owner?	Yes ()	No ()	
	If yes, who		
The Co-owner acknowledges and agrees that as become the Co-owner's responsibility for any fithe ownership of the property and the new own	uture damages attributab	le to such penetration. The	
Board Action: App	proved () De	enied () Del	layed ()
Reasons for Board Decisions/Condition	ons of Approval:		
Board Member Signature:			
Date of Action:			