## WESTBROOKE CONDOMINIUM ASSOCIATION

### **ALTERATION/MODIFICATION REQUEST**

Date		BL	.DG. NO	UNIT NO
Owner Na	me			
Owner Add	dress			
Owner Home Phone		Business Phone		
REOUES	TED MODIFICATIONS			
	Exterior Appearance		Landscaping	
	Structural Parts of Unit		Common /Liı	mited Common Elements
	Satellite Dish- Select one: Pole Mount / balcony or deck mount / fascia-wood trim mount			
	Storm Door			
	Other			
Please note landscapin	e that you MUST submit a draw g modification, etc. The drawin oot. Please list sizes and materia	ing for a g should	l be on a site p	· · · · · · · · · · · · · · · · · · ·
This work				
(List addre	ess and phone number if outside of			

#### PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING:

- 1. Actual construction will be performed by a licensed builder/contractor who is insured. All applicable codes and regulations will be followed and all necessary permits will be obtained at my/our expense.
- 2. I/we have read all applicable sections of the Bylaws and I/we understand same.
- 3. All maintenance of this Alteration/Modification will be performed at my/our expense.
- 4. I/we understand that, should any legal, regulatory agency require, at any time in the future, modifications to this variance, they will be done at my/our expense.
- 5. Any maintenance costs incurred by the Association, as a result of this variance, will be at my/our expense.

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- 6. I/We further understand that responsibility for any damage to the plantings, lawn, trees and/or landscaping belongs to the Co-Owner.
- 7. This alteration/variance/modification is subject to all the requirements of the Bylaws, occupancy agreements and other applicable regulations at the Board of Directors' discretion.
- 8. I/we understand that it is my/our responsibility to advise future assigns and/or owners of the unit of this modification and of their responsibility for same.
- 9. All of the above information is truthful and accurate.

# NO WORK SHALL COMMENCE UNTIL WRITTEN APPROVAL IS RECEIVED

Date	Signature of Co-owner
Date	Signature of Co-owner
We c/o McG PO I	ETURN COMPLETED FORM TO: stbrooke Condominium Association Cormick Community Management, LLC Box 871865 Canton, MI 48187-1865 vnn@McCormickCommunityManagement.com
Approved by	Date
Printed:	Title: