

REQUEST FOR MODIFICATION APPROVAL
To be completed by homeowner

Send completed and signed form and all applicable fees to: Cummings Property Management, 6190 Taylor Drive, Flint MI 48507, Phone: 810-715-5310, Fax: 810-715-5316

ASSOCIATION NAME: _____

HOMEOWNER'S NAME: _____

ADDRESS: _____ PHONE: _____

UNIT NUMBER: _____

Anticipated start date for Modification: _____

MODIFICATION IS TO THE: (check those applicable)

_____ Exterior Appearance	_____ Structural parts of the unit
_____ Common Elements, Limited	_____ Common Elements, General
_____ Landscaping	

DETAILED EXPLANATION OF THE MODIFICATION (Use additional sheets and/or attach sketches as necessary; scaled drawings, color boards and materials samples may be required)

SPECIAL NOTES:

1. Any additions or changes to the Common Elements must be approved by the Board of Directors.
2. Maintenance, repair, replacement, and insurance of any approved change is the responsibility of the Co-owner and subsequent Co-owners.
3. If any Co-owner fails to properly maintain any approved change, the maintenance will be done by the Association and assessed to the Co-owner.
4. Unauthorized changes may be removed by the Association and the cost of removal assessed to the offending Co-owner.
5. Notify management when the Modification is complete (810/715-5310).
6. In the event that during or after construction there is any injury incurred by an employee or guest as a result of the modification, the Co-owner will hold the Board of Directors, the Association, and Cummings Property Management, Inc. blameless.
7. In the event maintenance is necessary on Common Elements, all alteration and modifications may be required to be removed at Co-owner's expense to allow access for entry.
8. The Board of Directors retains the right to require Co-owner to maintain the modification to the standards of the Association as determined by the Board.

I agree that I will not make any of the above modifications until I have received written notice of approval from the board or the relevant committee, and I will pay all reasonable review fees associated with this request.

DATE

CO-OWNER'S SIGNATURE

RECORD OF ACTION

APPROVED: _____

DENIED: _____

DATE

SIGNATURE