

## REQUEST FOR ARCHITECTURAL IMPROVEMENT/ ALTERATION

NAME:			
UNIT ADDRESS:			
PHONE: home:	work:	cell:	
SUBMISSION DATE:			
IMPROVEMENT/ALTERATION TO UNIT OR LIMITED COMMON ELEMENTS			
Please give a brief description of the improvement, where it is, or is to be located, type of materials involved, etc. (Emergencies will be handled on a case-by-case basis.)			
MAIL COMPLETED FORM TO:	c/o The Select Group, I 2224 Virginia Beach Bo Virginia Beach, VA 234	Inc. ulevard, Suite 201	<u> </u>
FOR OFFICE USE ONLY			
□ REQUEST APPROVED BY T □ REQUEST APPROVED BY T MODIFICATION	HE BOARD OF DIREC	TORS SUBJECT TO	
☐ REQUEST DISAPPROVED E	BY THE BOARD OF DIF	RECTORS	
DATE	SIGNED		