

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, In 2224 Virginia Beach Bou Virginia Beach, VA 2345	nc. ılevard, Suite 201	group.us
FOR OFFICE USE ONLY			
 □ REQUEST APPROVED BY THE BOARD OF DIRECTORS □ REQUEST APPROVED BY THE BOARD OF DIRECTORS SUBJECT TO MODIFICATION			
☐ REQUEST DISAPPROVED E	BY THE BOARD OF DIR	ECTORS	
DATE	SIGNED		