



Lynnhaven Shores Condominium Association

REQUEST FOR ARCHITECTURAL/APPEARANCE CHANGE

Date of Request _____

Unit making Request _____

Owner Name _____

Related Condominium Documents
By the Declaration

Section Five: USE OF FAMILY UNITS; CHANGES.

(c.) An owner shall not make structural modifications or alterations in his unit or installations located therein without the prior consent of the Association in writing, through the management agent, of any, or the president of the Board of Directors if no management agent is employed. The Association shall have thirty days, and failure to do so within the stipulated time period shall mean that there is no objection to the proposed modification or alteration.

Request Details-As specifically as possible please describe the alteration that you are requesting and why. Also provide any Pictures, Drawings, or Brochures if possible. Add additional pages if needed.

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OFFICE USE ONLY

Approved **Not Approved** **Approved as Noted** **Revise and Resubmit**

Board Representative _____ Date _____

Signature

Please return completed form to The Select Group at the address or fax number provided below or email to afleetwood@theselectgroup.us