

300 Mason Avenue,

A Condominium Association

APPLICATION FOR MODIFICATION, ALTERATION OR ADDITION

I. PROPERTY OWNER DATA

Name: _____

Address: _____ Unit Number: _____

Telephone: _____ Email: _____

II. DETAILED DESCRIPTION OF REQUESTED ALTERATION:

Provide ALL dimensions, materials, colors, and any other pertinent data. For major changes MUST include a complete drawing that show dimensions and indicate placement and/or location of proposed change with respect to the unit. The ASC cannot act without this key information and the application will be returned without action. **Remember, do not build or install modification without ASC written approval.**

III. DESCRIPTION OF ALL MATERIALS TO BE USED:

IV. NAME OF CONTRACTOR (or SELF if applicable): _____

V. ARE CITY ZONING AND PERMIT APPROVALS REQUIRED FOR PROPOSED WORK? ___ YES ___ NO

APPLICANT SIGNATURE: _____ DATE: _____

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

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Date Application Received: _____ Application Number Assigned: _____

ASC Member _____ ASC Member _____ ASC Member _____
Approve/Disapprove Approve/Disapprove Approve/Disapprove

Applicant Notified of Decision: _____