

**HIDDEN MEADOWS CONDOMINIUM ASSOCIATION
ALTERATION/MODIFICATION REQUEST**

DATE _____ ADDRESS _____

Owner Name _____

Owner Address _____

Owner Home Phone _____

Email _____

REQUESTED MODIFICATIONS

*Exterior Appearance

*Landscaping

*Structural Parts of Unit

*Common/Limited Common Elements

*Satellite Dish-Roof Mount.

*Other _____

EXPLANATION OF MODIFICATIONS

Please note that you **MUST** submit a drawing for any modification which requires same such as a landscaping modification, etc. The drawing should be on a site plan and the scale should be ½" – one (1) foot. Please list sizes and materials to be used.

This work will be performed by: _____
(List address and phone if outside contractor is to be used.) _____

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING:

1. Actual construction will be performed by a licensed builder/contractor who is insured. All applicable codes and regulations will be followed and all necessary permits will be obtained at my/our expense.
2. I/we have read all applicable sections of the Bylaws and I/we understand same.
3. All maintenance of this Alteration/Modification will be performed at my/our expense.
4. I/we understand that, should any legal, regulatory agency require at any time in the future, modifications to this variance, they will be done at my/our expense.
5. Any maintenance costs incurred by the Association, as a result of this variance, will be at my/our expense.
6. Prior to submitting a proposal for any alteration/modification that will require digging deeper than 3 inches into the ground, the Co-owner will need to contact Miss Dig to have all underground utilities flagged. Should any sprinkler heads need to be relocated; or lines repaired due to Co-owner negligence, this will be done exclusively at the owner's expense.
7. I/we further understand that responsibility for any damage to the plantings, lawn, trees and/or landscaping belongs to the Co-owner.
8. This alteration/variance/modification is subject to all the requirements of the Bylaws, occupancy agreements and other applicable regulations at the Board of Directors' discretion.

9. I/we understand that it is my/our responsibility to advise future assigns and/or owners of the unit of this modification and of their responsibility for same.
10. All of the above information is truthful and accurate.

**NO WORK SHALL COMMENCE
UNTIL WRITTEN APPROVAL IS RECEIVED**

Date _____

Signature of Homeowner _____

Signature of Homeowner _____

RETURN COMPLETED FORM TO:

HIDDEN MEADOWS CONDOMINIUM ASSOCIATION, INC.

C/o KC Property Services, LLC

26711 Woodward Ave. #310

Huntington Woods, MI 48070

P) 248-586-9700 F) 248-586-9704

OR

P.CADMAN@KCPROPERTYSERVICE.COM

Approved by: _____ Date: _____

Printed: _____ Title: _____