

**ARCHITECTURAL CHANGE
REQUEST**



Please complete the form and return it to a member of the Briar Lake Executive Board by email (briarlake815@gmail.com), mail, or by putting it in the dropbox in the Clubhouse.

HOMEOWNER NAME (PLEASE PRINT) _____

UNIT ADDRESS _____

PHONE NUMBER _____ **DATE OF REQUEST** _____

Architectural Change: Briefly describe the request for your addition or alteration. Attach a drawing or photos that show the proposed change to the structure, a description of the materials being used, the name / number of the contractor, and a copy of the proposal/ estimate from the contractor. The contractor must hold a workman's compensation certificate and provide a copy to the unit owner and the Briar Lake UOA.

You must wait for Board approval prior to beginning the project. This request is valid for six months from the approval date. If the project is delayed beyond six months, you will need to resubmit for approval.

REQUEST FOR ARCHITECTURAL CHANGE

***FOR OFFICE USE ONLY:** **Date Received** _____ **Date Forwarded** _____

APPROVED **APPROVED AS NOTED BELOW** **DENIED, AS NOTED BELOW**

BOARD SPECIFICATIONS

Board Signature _____

Date _____ **Date to be completed** _____