

ARBOR MEADOWS RETIREMENT CONDOMIMIUMS

APPLICATION FOR APPROVAL OF CHANGES, IMPROVEMENTS OR MODIFICATIONS

UNIT Number	_Resident Name
Phone	_ Email
Request for Primary Approval 🔲 Final Approva	

The undersigned Owners hereby request approval of the changes, modifications or improvements to the above mentioned unit.

Description of improvement or modification:

Project Start Date	Project Finish Date		
Contractor Information:			
Name		Address	
Phone	Email		
Insurance		Specific Plans attached 🗖 not attached 🗖	

I understand that under the Declaration and the Rules and Regulations, the Board will act on this request and provide me with a written response of the decision. I further understand and agree to the following provisions of their:

- 1) No work or commitment of work will be made by me until I receive written approval from the Association Board.
- 2) All work will be done at my expense and all future upkeep will be at my expense.
- 3) All work will be done expeditiously once commenced and all will be done in good workman-like manor by myself or a contractor.
- 4) All work will be performed at a time and in a manner to minimize interference and inconvenience to other Residents.
- 5) I assume all liability and will be responsible for all damage and/or injury which might result from performance of this work.
- 6) I will be responsible for all conduct of persons, agents, contractors and employees who are connected with this work.
- 7) I understand that a decision by the Board is final.

Signature of Owners ____

Date ____