

DEERVIEW HOMEOWNERS ASSOCIATION

REQUEST FOR IMPROVEMENTS TO UNIT

NOTICE TO OWNERS: Your proposed improvements may require a building permit. You or your contractor should check with Grand Rapids Township before starting any work.

Date: _____ Day Phone: _____ Evening Phone: _____

OWNER: Name: _____

Street Address: _____

City, State, Zip: _____

ADDRESS OF IMPROVEMENT: _____

UNIT # _____

DESCRIPTION OF PROPOSED IMPROVEMENT (Attach Sketches or Drawings as Required):

WORK SCHEDULE: Planned Start Date: _____ Planned Completion Date: _____

I will not start work on the proposed improvement unless and until approved by the Architectural Control Committee (ACC). I will assume the responsibility for any work under the above proposed improvement that my contractor or I accomplish which may, in the future, adversely affect the common area. I will assume responsibility for all future maintenance of this addition or improvement. I hereby indemnify the Association against any costs or harm to this addition or improvement.

OWNER'S SIGNATURE: _____ DATE: _____

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The undersigned (ADJACENT) (FACING) (IMPACTED) (circle one) owner:

_____ Has no objection to the proposed improvement

_____ Objects to the proposed improvement (Please state reason for objection on the back of this form)

Definitions:

ADJACENT OWNER – Owner of units with property lines adjoining the unit to be improved.

FACING OWNER – Owners of the three units most directly across the street from the improvement.

IMPACTED OWNER – Owners of the units in the immediate surrounding area that would be affected by the construction of the improvement.

NAME: (Print) _____

SIGNATURE: _____

ADDRESS: _____

PHONE NUMBER: _____

UNIT # _____ DATE: _____