

## ARCHITECTURAL IMPROVEMENT/MODIFICATION APPLICATION

Approval expires 6 months from approval date. You must re-submit form if work is not completed within that time frame.

Homeowner Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

May we email you with questions or a decision, for faster response time? YES ☐ NO ☐

### General Description of Improvement/Modification

Location (if applicable) \_\_\_\_\_  
Dimensions (if applicable) \_\_\_\_\_  
Construction Material (if applicable) \_\_\_\_\_  
Supplier/Contractor \_\_\_\_\_ Approx. Cost \_\_\_\_\_

### REQUIRED DOCUMENTATION: The following documentation MUST be provided for consideration

- Certificate of insurance from your outside contractor, showing coverage for liability and workers compensation
- Scope of work / specifications / proposal from your contractor
- A photograph of any existing element to be changed (i.e. windows, door, etc.)
- A drawing, sketch, picture and/or brochure of the proposed improvement/modification location and product to be installed, as applicable
- Homeowner must fill out this form. Renters cannot submit this form.

*As of the approval date of this improvement/modification, I accept full responsibility for the upkeep, maintenance, and replacement of the improvement/modification and do hereby hold the Association harmless against all claims. Should this improvement/ modification be maintained in improper condition, in accordance with the Rules and Regulations and/or Declaration, the Association reserves their right to remove said improvement/modification and all associated costs to be billed back to the homeowner.*

*Additionally, I understand that commercial signs are not permitted by the Association; I agree to instruct any contractor working at/on my unit not to place any signs on or around the property, and will not accept any reimbursement from the contractor for allowing them to post a commercial sign. Should a sign or signs be posted, I understand that a Notice of Violation may be issued and/or fines may be assessed by the Association.*

X  
Signature of Homeowner \_\_\_\_\_ Date \_\_\_\_\_

### FOR INTERNAL USE ONLY

Date Received: \_\_\_\_\_ APPROVED / DISAPPROVED

Signature of Management, On Behalf of the Board of Directors		Date	
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REASON FOR DISAPPROVAL:

Mail Application and Sketch of Improvement to: Sussex Square Condominium Association c/o Foster Premier Inc.  
750 W. Lake Cook Road, Suite 190, Buffalo Grove, IL 60089, Attn: Carly Hong, Property Manager or fax to: (847) 459-1240.  
Email: [chong@fosterpremier.com](mailto:chong@fosterpremier.com) Phone: (847) 850-1185