

**THE COLONY AT EDINA CONDOMINIUM ASSOCIATION**

**Architectural Change Request**

**(Must be submitted to [office@colonyedina.com](mailto:office@colonyedina.com) or delivered to the Business Office for Board approval prior to any work being performed)**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DETAILS OF CHANGE REQUESTED: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

VENDOR/CONTRACTOR PERFORMING WORK: \_\_\_\_\_

\_\_\_\_\_

Licensed/Bonded: Yes \_\_\_\_\_ No \_\_\_\_\_ License #: \_\_\_\_\_

(Provide Certificate of Insurance)

Permit Required? Yes \_\_\_\_\_ No \_\_\_\_\_ Permit Number: \_\_\_\_\_

Product Information (provide photos if possible): \_\_\_\_\_

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**(Use Back of Page If More Space is Required)**