



# W. L. Seymour, Inc.

*Real Estate Management*

1921 ROHLWING ROAD  
SUITE D  
ROLLING MEADOWS, IL 60008

(847) 359-8980  
FAX (847) 359-8981  
MAIL@WLSEYMOUR.COM

## ALTERATIONS, ADDITIONS, AND REPAIRS APPLICATION

**Association Name:** \_\_\_\_\_

**Owner's Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_ **Unit No.** \_\_\_\_\_

**Owner's Address:** \_\_\_\_\_

**Home Telephone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Nature of Improvement:** Include dimensions, location, type, etc. Attach an additional page if necessary:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Proposed Materials:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Contractor:** \_\_\_\_\_ **Approximate Cost:** \_\_\_\_\_

**Contractor Certificate of Insurance Received:** \_\_\_\_\_

**I (we) understand that installation of the improvements proposed herein must conform to the specifications outlined. Any deviations from the specifications herein could result in the improvement being removed or altered at my (our) expense. I (we) agree to abide by the rules set forth in the guidelines and will be solely responsible for**

**continued upkeep and maintenance of the improvement and will also be solely responsible for any encroachment this improvement may make on private property or common area. I (we) agree that upon a breach or violation of Rules and Regulations, my (our) Condominium/Townhome Association, in addition to all other remedies, shall be entitled as a matter of right to injunctive relief in any court of competent jurisdiction.**

**Date:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Note:** Approval is valid for six (6) months from date of issue. An extension may be granted upon application.

**Date Received:** \_\_\_\_\_ **Date Approved:** \_\_\_\_\_

**Date Disapproved & Reason:** \_\_\_\_\_

---