

RIVER PINES OF FARMINGTON CONDOMINIUM ASSOCIATION REQUEST FOR MODIFICATION APPROVAL

Date: _____

Name: _____

Address _____

Phone: _____

EXPLANATION OF MODIFICATIONS:

Please note that you **MUST** submit a drawing for any modification, which requires it such as a deck landscaping modification, etc. The drawing should be on a site plan and the scale should be 1/2" = one (1) foot. Please list sizes and materials to be used.

(Check all the items that are applicable)

MODIFICATION WILL AFFECT THE FOLLOWING:

Exterior Appearance	Structural Parts of Unit
Limited Common Elements	General Common Elements
Landscaping	Other

If approved, the modification will be started on: _____

Contractors Name: _____

Contractors Phone: _____

Anticipated Date of Completion: _____

PLEASE READ THE FOLLOWING CLOSELY BEFORE SIGNING:

1. A licensed builder who is insured will perform actual construction. All applicable codes and regulations will be followed and all necessary permits will be obtained at my/our expense.
2. I have read all applicable sections of the Bylaws and understand same.
3. All maintenance to this alteration/variance/ modification will be performed at my expense.
4. I understand that, should any legal regulatory agency require, at anytime in the future, modifications to this variance, they will be done at my expense.

- 5. Decks cannot be installed over drainage swale. In the event the deck does interfere with the surface drainage the owner will be required, at their expense, to correct the drainage to the Association's satisfaction.
- 6. Any maintenance costs incurred by the Association as a result of variance will be paid by me.
- 7. This alteration/variance/modification is subject to all the requirements of the Bylaws, occupancy agreements and other applicable regulations at the Board's discretion.
- 8. I understand it is my responsibility to advise future assigns or owners of this unit of this modification and of their responsibility for same.
- 9. Co-owner will be responsible for any damages to common elements due to modification.
- 10. All the above information is truthful and accurate.

All applicable permits and City/Township inspections must be obtained by the co-owner. No modification shall commence without prior Board approval.

An inspection of the completed modification shall be conducted by the Board of Directors to insure compliance with all appropriate ASSOCIATION restrictions and with reasonable standards of quality and aesthetics.

Co-Owner

signature: _____ Date: _____

Co-Owner

signature: _____ Date: _____

COMPLETED FORM MUST BE MAILED TO:

MCSHANE AND ASSOCIATES, INC.
 6230 ORCHARD LAKE ROAD. SUITE 200
 WEST BLOOMFIELD, MI 48322
 (248) 855-6492
 Fax: (248) 855-4104

NO WORK SHALL COMMENCE UNTIL WRITTEN APPROVAL IS RECEIVED

This modification request has been evaluated by the Board of Directors and is:

ACCEPTED _____ with the following restrictions: _____

REJECTED _____ due to: _____

For the Board of Directors: _____ Date: _____