

River Pines Condominium Association

Request for Modification Approval

Name: _____ Phone: _____

Address: _____

NATURE OF MODIFICATION (Describe in detail, using additional sheets and/or sketches as required):

Modification will affect the following (Check all that are applicable):

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

If approved, modification will be started on: _____

Contractor Name: _____

Contractor Phone: _____

Anticipated date of completion: _____

Please read the following closely before signing:

1. The actual construction must be performed by a licensed builder who is insured. All applicable codes will be followed and the co-owner will obtain all appropriate permits and/or City/Township inspections at the co-owners expense. No modification shall commence without prior Board approval.
2. I have read all applicable sections of the Bylaws and understand same.
3. All maintenance, repair, replacement and insuring of 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 swales. 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, whether damage occurs during or after the modification is made.

- 10. Depending on the nature of the modification, the Co-owner may be required to sign an agreement setting forth these obligations that will be recorded with the Register of Deeds against title. The signing of this agreement and payment of the filing fees (\$26.00) will be a precondition to any approval given.
- 11. All the above information is truthful and accurate.

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: _____

Completed Form (electronic format is acceptable) 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

Or e-mailed to:

Courtney@mcshanemanagement.com

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: _____

Modification number: _____

REJECTED _____ due to: _____

Recordable Modification Agreement Required: ____ YES ____ NO

For the Board of Directors: _____ Date: _____