

Sunn Fjord - Request for Unit Modification

Date: _____

Unit Number: _____

Owners Information: _____

Owners Phone: _____

Owners Signature: _____

Please describe the nature and location of the modification you are requesting:

(i.e. Hard Surface Flooring, Window Installations, etc) Attach separate page if necessary

Please describe the type of materials you plan to use in your modification:

Attached information on materials if available.

Will this be performed by a licensed General Contractor or by the unit owner?

Contractor information: _____

Owner Information: _____

Does this modification request comply with all of the governing documents of the Association?

(i.e. article 11.5 of the Declarations.)

Yes _____ No: _____ I don't know: _____

Additional Comments: _____

For Official Use only:

Date Received: _____

Reviewed by: _____

Board Approved: Yes _____

No: _____

Owner notified of status: Yes _____

No: _____ Date: _____

Documented in Minutes: Yes _____

No: _____ Date: _____

Board Signature: _____

Permission must be obtained from unit owners that live above and below your unit when installing hard surface flooring before board approval.

Unit Number: _____ Owners Name: _____ Signature: _____

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