

Association Name \_\_\_\_\_

### Architectural Modification Request Form

Date of Application: \_\_\_\_\_

#### Homeowner Information

Name: \_\_\_\_\_

Unit Address: \_\_\_\_\_ Unit # (if applicable) \_\_\_\_\_

Home # \_\_\_\_\_ Cell # \_\_\_\_\_ Work # \_\_\_\_\_

Email Address: \_\_\_\_\_

#### Modification Information (If additional space is needed, attach a second sheet of paper)

Nature of Modification: \_\_\_\_\_

Location of Modification: \_\_\_\_\_

Dimensions (if applicable): \_\_\_\_\_

Construction Material (if applicable): \_\_\_\_\_

Name of Contractor: \_\_\_\_\_

All modification requests must be accompanied by the following documents:

	Check if Attached
1. Picture or brochure	
2. Copy of Contractor's proposal (or list of materials if Homeowner installed)	
3. Sample copy of Contractor's Certificate of Insurance (Once approved, another certification must be submitted which includes liability and w/c coverage and the Association must be listed as Additional Insured)	
4. Drawing of modification showing location and dimensions (if applicable)	

Your request will only be submitted for consideration if all documentation has been submitted properly. Requests are reviewed by the Board or Architectural Committee. Review and approval may take up to 45 days, depending on the association. Missing or incorrect documentation will delay the approval process.

IF THIS ALTERATION IS APPROVED, I ACCEPT FULL RESPONSIBILITY FOR ALL OF THE UPKEEP OF THE ALTERED AREA AND AGREE TO MAINTAIN IT IN A SAFE CONDITION. I UNDERSTAND THE ALTERATION MUST BE PERFORMED WITHIN THE SAME YEAR OF APPROVAL, OTHERWISE APPROVAL IS VOID.

Homeowner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*(Required for processing)*

**Please send completed forms and any attachments via:**

**Mail:** MC Property Management Corp.  
14224 McCarthy Road, Lemont, IL 60439

**Email:** [sandy@mcpmc.com](mailto:sandy@mcpmc.com)

**Fax:** 630-985-2583 (Attn: Sandy)

#### For office use only

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Board Approval by: \_\_\_\_\_ Date: \_\_\_\_\_

Approval letter sent \_\_\_ YES \_\_\_ NO

Reason if disapproved: \_\_\_\_\_