EVERGREEN LAKES CONDOMINIUM ASSN. Request For Architectural Modification

Owner	r's Name	e:						
Street	Address	s:						
City: _			State:			Zip Code:		
Teleph	none:	Home		Office_				
addition Pleas	on(s) as e inclu	s described a	sted to make thand depicted be tail as the dime	low or or	n additi	onal pages a	is necessary.	
1. 2. 3.	That if revoke expensions That I common to cornecess To abi That if to could be a second to c	ed and the mage in the mage in the second areas as male in the sary permits de by the de the modification.	ation is not com nodification will be ible to pay for a a result of an in e state, country, , if applicable. ecision of the AC ation is not apprehe Association	nd repair nstallation and/or ci CB. or the roved or c	any ar any ar ity build Board does no	e removed and all damaged ding codes and of Directors of comply, I/v	t the owner's e done to the nd to obtain a . ve may be su	all
Date of	of Requ	est	Signat	ure of Ho	meowr	ner		
*****	*****	*****	******	*****	*****	*****	******	*****
() Ap	proved	Comments:						
Cond	itions:	,						·
			nts:					-1
Board	of Dire	ctors		Bo	nard of			