Unit # _____
Unit owner _____
Owner telephone _____

ARBOR TRACE REQUEST TO MODIFY CONDOMINIUM UNIT

I/we request permission to modify the unit identified above.

Description of proposed modification: _____

_____

_____

Does the modification change the color or appearance of the condominium exterior or involve structural changes?

_____. (If yes, attach a complete description and scope of work.)

Does the modification involve hard-surface flooring? _____. (If yes, attach documentation and a sample of underlayment material showing the underlayment ratings with minimum STC rating of 58 and IIC rating of 62.) Removal of existing hard surface flooring and thin set material must be done with an electric walk-behind or ride on mechanical floor scraper. Pneumatic or electric vibrating chisels are not permitted without prior approval by the Association.

Does the modification involve plumbing? _____ (if yes, note that plumbing would need to be updated/replaced to include: water supply lines, copper "p" lines, mixing assemblies, cast iron drain lines, etc. that show deterioration or to update to current building code.
After installation, underlayment/plumbing must be inspected by Director of Maintenance before installation of finished flooring.

Name of licensed contractor who will be performing modifications:

_____ _____ _____
Individual Name Company Name Phone

Attach copies of contractor's license, liability & worker compensation insurance.

Project starting date: _____. Completion date: _____.

In order to avoid conflicts and to protect elevators and hallways, any change in the above date(s) must be approved by the Condominium Manager or Director of Maintenance.

UNIT OWNERS AND CONTRACTOR ACKNOWLEDGEMENTS:

1. We acknowledge that we have received, reviewed, and agree to comply with the General Rules for Renovations to Unit and General Rules for Contractors, and are aware of all restrictions.
2. We understand that written approval from a representative of the Arbor Trace Condominium Association must be obtained PRIOR to commencement of proposed modifications.
3. We agree to repair or replace any damages caused during the above-described modifications.

Date _____ Unit Owner _____

Date _____ Contractor _____

Date _____ APPROVED _____
Arbor Trace Condominium Association Representativ