

Bouchelle IX Condominium Owners Association
Architectural Change Request

Name of Homeowner:		Date:	
Street Address:			
Email Address:		Phone:	

Approval is hereby requested for the following modification(s), addition(s) and/or alterations as described below and on attached pages: Check one and/or describe below:

- | | | |
|---|---|-------------------------------------|
| <input type="checkbox"/> Doors | <input type="checkbox"/> Flooring (attach Rules Form) | <input type="checkbox"/> Water tank |
| <input type="checkbox"/> Hurricane Shutters | <input type="checkbox"/> Screen/Lanai enclosure | <input type="checkbox"/> Windows |
| <input type="checkbox"/> Other | | |

Describe the architectural change you wish to make (with supporting documentation attached):

- Specs: Attach copy of plans from any contractor or vendor providing service including color samples, photos, dimensions, etc.
- Attach appropriate CSA Form, if their review and approval is required.
- You are responsible for obtaining permits from the appropriate Building and Zoning departments
- No work shall commence until the association has provided written approval of the architectural change, Any work done without approval shall be reversed at the expense of the homeowner.
- The homeowner agrees to assume all liability related to the architectural change, including all persons and contractors who will perform the job.
- Please notify your neighbors before commencing any work.

Owners Signature: _____

Approved Denied

Date of Approval/Denial: _____ Signed: _____

Designated B IX Board Member