

**VILLAGE AT INDIAN CREEK CONDOMINIUM ASSOCIATION INC.  
REQUEST FOR ARCHITECTURAL CHANGE**

UNIT # \_\_\_\_\_ DATE: \_\_\_\_\_  
NAME OF OWNER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

In accordance with the Association's Declaration, the undersigned unit owner requests authorization to make the following modifications or alterations to the owner's unit # \_\_\_\_\_ in Village at Indian Creek Condominium Association, Inc.

**DESCRIBE:** Modification / Alteration  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ATTACH PLANS AND MATERIAL**  
\_\_\_\_\_  
\_\_\_\_\_

Contractors: Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

**I AM AWARE THAT THE CONTRACTOR MUST BE LICENSED AND FURNISH A CERTIFICATE OF INSURANCE COVERAGE PRIOR TO STARTING WORK.**

I (we) agree to maintain exterior improvements in accordance with the standards of Village at Indian Creek Condominium Association Inc.

**I/ We agree that the decision of the Board on this Matter is final and agree to abide by said decision.**

Signature of Owner: \_\_\_\_\_  
Owner: \_\_\_\_\_

**BOARD OF DIRECTORS:** \_\_\_\_\_ Approved \_\_\_\_\_ Denied DATE \_\_\_\_\_

\_\_\_\_\_  
Board Member/Agent Signature

If approved, date of Architectural Committee inspection of completed change: \_\_\_\_\_

FORM MUST BE COMPLETED IN DUPLICATE  
**Contractor must post a copy of this approval at job site.**