Condominium Improvement Approval Request Form

<u>Purpose</u>: This procedure will assure both the unit owner and the condominium association that modifications within their unit, or outside on Common Areas, are commensurate with the established physical appearance guidelines of the association, are completed by properly licensed and insured contractors, and will comply with appropriate state and local building codes.

<u>Procedure</u>: The unit owner completes this form and submits it to the Association Board. Please allow up to 30 days for determination. <u>No work may commence until written approval is received</u>. The Board reviews the proposal and informs the Unit Owner of the decision. It is imperative that all proposed contractors are properly licensed and insured and that building permits, when required, either are or will be obtained.

DATE:	
NAME:	
UNIT NUMBER/ADDRESS:	
EMAIL:	
SUMMARY/DESCRIPTION OF WORK TO BE COMPLETED, including detailed plans (if rename(s) of proposed contractors with certificate of insurance showing liability, workers comperapplicable) and vehicle insurance coverage with Sugarloaf Condominium Association named a additional insured, and a copy of the building permit (if required).	nsation (if
Email completed form to: condo@kendrickmanagement.com (preferred method of contact) Or mail to: Sugarloaf Condominium Association, c/o Kendrick Property Management, 2 Bay Hadley, MA 01035	Rd Ste 100
Do not write below line For Board Use Only	
Date Of Board Meeting:	
Summary/Determination:	