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10 BK (15 BK 23 D O - V 2 BB (15 K 25 D - 15 B VA)	A	S	2	U	6	IA			14

Request for Approval of Architectural Change

Name	Imag a st senodes	Init Number				
Address	apparem disability, t	Phone No				
necessary). Also, please i	nclude contractor na	r changes (using additional sheets and drawings as me, address phone number, type of material to be applicable and include a copy of all drawings.				
ath pinetts stettsred tiffin	SECOND IN HOUSEON	making me concert decision and portrags are assimatter over result in a legal battle.				
tion. First, if there is no	quested accommoda	There are two acceptable bases for denying a re- actual disability file cerson is not entitled to an ac-				
Work to be performed By	provide you with do	then you have the right to require the person to p disability. We recommend requesting a written sta				
Submit request to	y accommodation as	ASSOCIATION.				
Management or their Management, the improvor maintain the improvem	duly appointed rependent is not being number with the Unit Owner.	improvement if approved by the Board of presentative. If, in the view of the Board of naintained, the Association has the right to remove where bearing all costs. y, county and state laws and to obtain all necessary				
permits.						
Signature of Owner		Date Bionsait oldenoesonan				
For Architectural Committee The above-described archiApproved		Approved subject to the following conditions.				
ace. If the matter is ever ation's initial response to	aigh level of delere estigation, the associ	more intermation and creat the tant towner with a preferred to HUD or the Attorney General for investigation				
ganon wane casing me Newsletter 2009)	rone for the investi Delgado & Wood E-	association in a good light. (Carpenter Hazlewood				
THIS CHANGE TO BE (COMPLETED BY: _	The following pages contain sample requests to association:				
Signature of Architectu	ral Committee Mer	mber Date				