HOA Name here	
EVERTOR ALTERATION APPLICATION	N.I.

EXTERIOR ALTERATION APPLICATION

NAME:	
UNIT ADDRESS:	
HOME PHONE:	WORK/CELL PHONE:
DESCRIPTION OF WOF	K/ALTERATION:
FOR THIS REQUEST TO	BE CONSIDERED, YOU MUST ATTACH A DRAWING OR PLANS OF THE WORK TO BE PERFORMED, DESCRIBING
SIZE, SHAPE, COLOR, N	NATERIALS TO BE USED, LOCATION, INTENT OF USE, ALONG WITH ANY PHOTOS OF SIMILAR IMPROVEMENT IF
AVAILABLE.	
START DATE OF PROJE	CT:
COMPLETED DATE:	

(For your own convenience. Submit this request well in advance of your intended start date)

RESPONSE: THE BOARD OF DIRECTORS HAVE UP TO (30) THIRTY DAYS TO RESPOND TO YOUR REQUEST AFTER IT IS SUBMITTED.

NON-COMPLIANCE PENALTY: FAILURE TO FILE A REQUEST WILL RESULT IN AN AGGRESSIVE RESPONSE BY THE BOARD TO ASK YOU TO REMOVE THE ALTERATION AT YOUR EXPENSE. IF AN ALTERATION IS PERFORMED WITHOUT THE EXPRESS WRITTEN CONSENT FROM THE BOARD OF DIRECTORS OR THEIR AGENT, YOU WILL BE GIVEN (30) THIRTY DAYS TO COMPLY WITH THEIR REQUEST OF REMOVING THE ALTERATION. FAILURE TO REMOVE THE ALTERATION WITHIN THAT TIME FRAME WILL RESULT IN THE BOARD FILING A NON-COMPLIANT LIEN AGAINST YOUR UNIT AND/OR A LIEN OF UP TO \$50.00 A DAY, EVERY DAY THAT ALTERATION IS IN PLACE AFTER YOU HAVE BEEN NOTIFIED OF THE (30) THIRTY DAY PERIOD.