

Pine Knob Manor Homes

Clarkston, Michigan 48348

Alteration/Modification Request

Date: _____

Unit No.: _____

Homeowner Name: _____

Homeowner Address: _____

Homeowner Phone: _____

Requested Modification

- Exterior Appearance
- Structural Parts of Unit
- Landscaping
- Limited Common Elements
- Other, please list: _____

Explanation of Modification

Please note that you need to submit a drawing for any modification, which requires same, such as a deck, landscaping modification, etc. The drawing should be on a site plan and the scale should be 1/2"=1 foot. List sizes and materials to be used.

This work will be performed by: _____

Phone number and address of contractor: _____

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Please read the following carefully before signing:

1. A licensed contractor who is insured will perform actual construction. All applicable codes and regulation will be followed and all necessary permits will be obtained at my/our expense.
2. I/We have read all applicable sections of the Bylaws and I/we understand same.
3. All maintenance of the alteration/modification will be performed at my/our expense and maintained at my/our expense when applicable.
4. I/We understand that, should any legal, regulatory agency require, at any time in the future, modification to this variance, they will be done at my/our expense.
5. Any maintenance costs incurred by the Association, as a result of this variance, will be at my/our expense.
6. This alteration/modification/variance is subject to all the requirements of the Bylaws, occupancy agreements and other applicable regulations at the Board of Directors' discretion.
7. I/We understand that it is my/our responsibility to advise assigns and/or owners of the unit of this modification and their responsibility for the same.
8. All of the above information is truthful and accurate.

Signature of homeowner

Date

Signature of homeowner

Date

NO WORK SHALL COMMENCE UNTIL WRITTEN APPROVAL IS RECEIVED

To be completed by the Pine Knob Manor Homes Board:

The above alteration/modification request for Unit No. _____ is

- Approved
- Rejected

Signature of Board member

Date