## Maple Ridge Creek Village Condominium Association

## **MODIFICATION REQUEST FORM**

(Approval of the Board of Directors is required prior to the commencement of any modification.)

Co-owner Name:	Phone:
Address:	Unit #:
Requested Modification (Check Whatever App	olies):
Exterior Appearance Landscape S	tructuralPavers Other
MRC Policy Number that Applies: Paver Color (If applicable)	
Explanation of Modification: (If applicable, a diagram indicating distances from condo walls, driveway, and/or walkways and the position of sprinkler heads must be included with this form.)	
	[Continue on back if necessary]
<ol> <li>The work will be performed by:</li></ol>	
Signature of Co-owner:	Date:
Approved by:	Date:

Mail this completed form to the Management Company.