

Village at Riverbend Condominium Association

P.O. Box 397 • Plymouth, NH 03264

directors@villageatriverbend.net

LCMG Office: 603-960-9061 • lcmg.office@gmail.com

Request for Permission to Modify Common or Limited Common Area

Application Date: _____ **Unit #:** _____

Unit Owner Name(s): _____

Current Mailing Address: _____

City/State/Zip: _____

Telephone: _____ Email: _____

Contractor (if applicable): _____

Mailing Address: _____

City/State/Zip: _____

Telephone: _____

Worker's Comp Policy #: _____ Issue Date: _____

General Liability Policy #: _____ Issue Date: _____

Description of Proposed Modification (attach additional sheets as necessary):

Please provide a detailed written description of the proposed modification. Include the following: 1) rationale for modification, 2) description of materials to be used, 3) anticipated costs, 4) plans for maintenance, 5) drawing or photo of the area under consideration to include as much detail as possible, 6) pertinent written communications with abutters who may be directly affected by the modification. **NOTE:** Comments by any abutter may be used by the Board in its deliberations for approval/denial, but the absolute authority to approve or deny a proposed modification lies solely with the Board.

OWNER CERTIFICATIONS:

I/We hereby request permission to make the modification described above and submit the following supporting documents:

- A copy of the contractor’s insurance certificate naming the Village at Riverbend as an additional insured (if applicable)
- A photo or drawing showing the proposed location of the modification and relevant details
- Pertinent written communications with abutters

I/We have reviewed all Association Documents, not limited to the Declaration, Bylaws, and Rules and Regulations, and believe that the requested Modification does not violate any covenant and/or rule and regulation.

I/We understand that if the modification involves the building exterior (including decks and patios), all materials and colors must be approved by the Association before work begins. I/We certify that any construction will be performed by an insured contractor in accordance with all building and safety codes, as applicable.

By signing, unit owner(s) accepts fully the conditions and terms set forth in the Association’s policy on Modification of Common and Limited Common Areas:

Owner’s Signature: _____ **Owner’s Signature:** _____
Date: _____ **Date:** _____

BOARD ACTION:

► Application **APPROVED** by the Board of Directors: _____ (Date)
Reason(s) and Applicable Conditions or Exceptions, if any:

► Application **DENIED** by the Board of Directors: _____ (Date)
Reason(s):

Signature: _____
Name: _____
Title: _____