



THE OAKS IMPROVEMENT ASSOCIATION
Architectural Improvement Application Form

NAME: _____ PHONE: (____) _____

ADDRESS: _____ E-MAIL: _____

PLEASE NOTE: This form MUST be submitted to the Oaks office to request any changes, alterations, improvements or replacements to the Common or Limited Common Elements. Detailed plans and specifications must be submitted and attached to this application to show location and dimensions. It is duly noted that by submitting of this request does not guarantee approval of said request. The Board of Directors will review your request and respond to this request within 30 days of its receipt.

NATURE OF IMPROVEMENT, CHANGE, and ADDITION OR ALTERATION: Please provide as much detail as possible, including drawings, pictures, plans and specifications.

PLEASE PROVIDE:

Name of the supplier / vendor: _____

Supplier / vendor address: _____

Supplier / vendor phone & fax number: _____

➤ You must attach a copy of the supplier/vendors Certificate of Insurance to this application.

AS APPLICABLE PLEASE PROVIDE THE FOLLOWING INFORMATION:

Color(s): _____

Dimensions: _____

Style: _____

Location: _____

Type of materials: _____

I (we) the undersigned do hereby acknowledge that we have read and understand the Rules concerning the proposed improvement. I (we) agree to abide by the Rules set forth by the Association and will be solely liable for the upkeep and maintenance on the improvement.

Unit Owner Signature Date: _____

For Board Use ONLY:

Received by: _____ Date: _____

Approved by: _____ Date: _____

Disapproved by: _____ Date: _____

Inspected by: _____ Date: _____

Reason(s) for disapproval: