



# Maple Grove Village of Clawson Condominium Association

c/o In Rhodes Management Inc.  
3252 University Dr., Suite 145  
Auburn Hills, MI 48326  
(248) 652-8221 | Fax (248) 651-0662

## MODIFICATION REQUEST FORM

All changes, modifications or variances to the original/existing General or Limited Common Elements as specified in the current Condominium Bylaws require **PRIOR** approval before starting any modification. **Do not begin work until you have received a signed copy of this modification request.**

### CO-OWNER INFORMATION

Name:	Date:
Address:	Phone #:

### INSTRUCTIONS

Provide a detailed explanation of the modification requested. Attach drawings, contractor specifications, and/or pictures (if applicable) to this form.

### TYPE OF MODIFICATION (circle one)

Building exterior	Structural	Landscape	Windows/Doors	Other
Work description				
Work performed by				
Materials				
Color				
Dimensions				

### Please read the following carefully - by signing below Co-Owner agrees to the following:

1. Co-owner has read all applicable sections of the current Condominium Bylaws and understands the same
2. All applicable codes and regulations will be followed and all necessary permits will be obtained at co-owner expense
3. All maintenance to this modification will be performed at co-owner's expense
4. Co-owner understands that should any legal regulatory agency require modifications to this variance at any time in the future they will be done at co-owner expense
5. Co-owner will pay any maintenance costs incurred by the Association as a result of this modification
6. **Co-owner understands when/if unit is sold it is their responsibility to advise future assigns or purchaser of their responsibility for this modification**

I hereby certify all the above information is truthful and accurate.

\_\_\_\_\_  
Co-owner signature (must be signed by legal owner of unit)

\_\_\_\_\_  
Date

\_\_\_ Approved

\_\_\_\_\_  
Board member(s) signature

\_\_\_\_\_  
Date

\_\_\_ Rejected