## **ARCHITECTURAL VARIANCE FORM**

PLEASE PRINT	For Board/Committee Use Only
Name of Association	ACTION:
Name	<ul> <li>DENIED</li> <li>RETURNED FOR MORE INFO</li> </ul>
Address	COMMENTS
Telephone	
DESCRIPTION AND DIAGRAM OF REQUEST:	
Description	

PLEASE NOTE: If you have photo, please attach them here or to the back of this page

## PLEASE NOTE:

A plat of survey may be required. Should you need additional space, please use a separate sheet of paper.

I acknowledge that I will be responsible for any maintenance and or damage to or caused by the above requested items, and with respect to such items, in consideration of the Board of Directors approval of the above request. I hereby waive all rights to exterior maintenance of such items under the Declaration of Condominium Ownership and of Easements, Covenants and Restrictions for the Association. I also acknowledge that I will contact the village/city for approval and permits if necessary and obtain these items at my own cost.

Signature of Home Owner

PLEASE REMIT TO:

Real Estate Investor Service PO Box 497 Elmhurst, IL 60126

Fax (630) 206-1515