## APPLICATION FOR ARCHITECTURAL REVIEW

## HUDSON VIEW CONDOMINIUM ASSOCIATION

Date:	Contact Phone #		
I,	the owner of Unit (bldg. + unit #)	, hereby make	
application for app	roval to perform the following work on this unit or grounds as follows:		
•	ges like replace windows, doors, modifications/additions to exterior of of water heater, flooring, kitchen or bathroom renovations, satellite dish	<u> </u>	
	attach a complete copy of plans and specifications, copy of contractors surance naming Hudson View Condominium Association and WPM		
is sold, either the n	'this request is approved, all perpetual care is the unit owner's responsible wunit owner will accept the responsibility of perpetual care or the app the original condition at the unit owner's expense.	3	
It is your responsib	is your responsibility to secure any necessary permits and inspections of the work being done (if applicable)		
fine of \$50 per viol	e contents of this request are not implemented as described, the unit own lation, understanding that each day a violation continues after notice sha The modifications must be returned to the original condition at the unit	all be considered a	
	t in common charges nor in violation of any of the provisions of the Huciation Offering plan and/or By-laws.	dson View	
Unit Owner's Sign	nature:		
Your Request for A	Architectural Review is approved with the following conditions:		
Your Request for A	Architectural Review is denied for the following reason:		
The following/addi	itional information needs to be submitted to reevaluate your application:		
For the Board of D	irectors: Date:		