

Date Received (Office Use Only): _____

MARKET STREET AT TOWN CENTER CONDOMINIUM

Application for Exterior Modification

Name: _____ Phone (H): _____

Unit #: _____ Phone (W): _____

E-Mail: _____

Proposed Modification: _____

Door Manufacturer: _____

Door Installer: _____

Style: _____ Color: _____

Dimensions: _____ Materials: _____

Location: _____

Schedule (start and completion date): _____

Other details: _____

Attach the following:

- Drawings, sketches, photographs, and/or pictures of the proposed modification
- Include floor plan of unit and mark door-window(s) where screen(s) will be placed

I hereby certify that the information I have provided is accurate to the best of my knowledge. I further certify that, once approved, the proposed modification will be installed according to the approved plans, schedule, and specifications.

Owner Signature: _____ Date: _____

Mailing Address: _____

(If different from Property Address)

Office Use Only
Response to Application

Application Received From :

Unit:

Conditional Approval signed and received :

Date:

Date Action Taken:

_____ Application Approved

_____ Additional Information Requested

Comments:

If additional information requested:

Date Reconsidered: _____ Application Approved

_____ Application Denied

Stipulations and Conditions:

1. All modifications must meet the requirements of the Fairfax County zoning/building codes.
2. All modifications must meet the requirements of the Bylaws of the Unit Owners Association of Market Street at Town Center Condominium.
3. The proposed modifications must be constructed/installed according to the approved plans, specifications, and schedule (commenced within 3 months and completed within 6 months of the approval date).

Approval Granted:

Signature

Position