

**ARCHITECTURAL/LANDSCAPE IMPROVEMENT APPLICATION**  
**Dominion Patio Homes Condominium Association No 1-A**

Name(s) of Unit Owners:

Unit Address:

\_\_\_\_\_  
\_\_\_\_\_

Home Telephone: \_\_\_\_\_

Work Telephone: \_\_\_\_\_

Nature of improvement: \_\_\_\_\_

\_\_\_\_\_

Detailed plans and specifications of all improvements/changes must be submitted and attached to this application to show locations and dimensions of all proposed alterations.

Submit your installers Certificate of Insurance showing liability coverage, Workers Compensation, and naming the Dominion Patio Homes Condominium Association No 1-A and Williamson Management, Inc. as additional insured's, along with this application.

We the undersigned do hereby understand that we must receive prior written authorization from the Board of Directors before any work is started. We agree to abide by the decision set forth by the Board of Directors and will be solely liable and responsible for the upkeep and maintenance of this improvement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Contractor Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

Application received on: \_\_\_\_\_

Approved / Disapproved and reason(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Adopted April 11<sup>th</sup> 2005