## **CONDOMINIUM 13**

## Simple Variance Application

Unit Owner:		Telephone No.:
Unit #:	Model Type:	Date of Application:
		e project you are planning to perform at your unit. If applicable, attach a sketch of he manufacturer and model number. Include the name of the contractor whom you
1. The over Condo indeport the control Prope	ominium 13 as additional insured. endent contractor for the unit ow ourse of work. Proof of insurance	r a copy of his certificate of insurance naming the unit owner and Being named as a certificate holder establishes that the vendor is an ener and would make the vendor liable if something should break in must be furnished to the Board of Manager's and/or the Condo 13 allowed to begin work until he/she provides a certificate of insurance.
	E BY UNIT OWNER(S): We agree ne Board of Managers.	to carry out the revision as described above, subject to any limitations
keep in good r respect to whi part of the do	repair at my (our) cost and expensich the variance is granted. I (we)	uent approval by the Board of Managers, I (we) agree to maintain and se, that part of said unit or of the associated common elements with further understand that this statement will become a permanent nowledge that the obligation as stated in this agreement will be
Unit Owner's	Signature:	Date:
Unit Owner's	Signature:	Date:
BOARD OF MANA	AGER'S ACTIONS:	
	tions/Conditions, if any, of the Co	ndo 13 Maintenance, Landscape Chairs and/or Property
Approval	Denial	Signature/Title:

Copies (3): Original to Secretary to be filed in variance folder, Copy to Maint. or Landscape Chair, Copy to Owner