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**LIONS HEAD CONDOMINIUM ASSOCIATION, INC.  
UNIT OWNER REQUEST FOR CHANGE**

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**This form is to be used to request permission for change to any unit. "Change" is defined as construction and/or remodeling that changes the interior or exterior of your unit. The Board of Directors cannot dictate personal decorating changes to your unit. However, if a contractor is required for the work, the contractor must be compliant with insurance coverage and submit certificates of insurance to KMC.**

Resident Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Describe the proposed change. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

If the proposed change is a remodel, please submit drawings and contractor's plan for all improvements and changes.

Does any part of the proposed change involve electrical, plumbing or vent structures serving any other unit? \_\_\_\_\_ Yes \_\_\_\_\_ No

Will any windows be replaced? \_\_\_\_\_ Yes \_\_\_\_\_ No.

Note: If windows are replaced, they must adhere to the Declarations and include grids.

Does any part of the proposed improvement involve Common Area landscaping?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, you need to submit a drawing of the proposed landscaping plan and acknowledge by your signature below that you will maintain the area on an annual basis and if you sell the unit, you agree to notify any new owner of their responsibility to maintain the area and provide proof that notice was given or return the area to its original state.

Please provide names and addresses of all contractors and/or subcontractors that will perform the change request.




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Please provide certificates of insurance for each contractor with this Request for Change form.

Proposed Start Date: \_\_\_\_\_

Proposed Date of Completion: \_\_\_\_\_

By signing this Request for Change, you acknowledge that you have shared the LHCA Contractor Rules & Regulations with your contractor and that those Rules will be adhered to for the safety and enjoyment of the community.

\_\_\_\_\_  
Signature of Unit Owner

\_\_\_\_\_  
Printed

\_\_\_\_\_  
Date

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KMC/Board:

Approved: \_\_\_\_\_

Not Approved: \_\_\_\_\_

Date: \_\_\_\_\_