

## Marina Place Architectural Review Form

Contact Information		Date Submitted	
Owner Name		Unit #	
Primary Phone #			
Secondary Phone #			
Address			
Email Address			

**Description of Change/ Modifications - check all that apply**

Description		Details / Comments
Install / replace appliance		
Electrical wiring		
Install new lighting		
Install / replace thermostat		
Other		
Replace baseboard heater		
Install new flooring		
Install Fireplace Insert		
Plumbing		
Structural*		
Other		

\* Additional details required for structural modifications. Please reference the Association's Architectural Review Rules and Guidelines and Section X of the Rules and Regulations.

**Proposed Contractors (if known)**

Name	Phone

Anticipated Start Date of Work (if known)	
Expected Completion Date of Work (if known)	

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## Architectural Review

Completed on		
<b>DECISION</b>		
Approved		
Declined		
Additional Detail Rqd		