ROZLAND CONDOMINIUM ASSOCIATION, INC.

LYNX PROPERTY SERVICES, LLC.

12485 SW 137 AVE SUITE 309 Miami, FL 33186 Phone: 305-251-2234 Fax: 305-252-6165

Business hours: M-F 8:30 AM - 5:30 PM

ARCHITECTURAL MODIFICATION REQUEST

(Form to be used when requesting a change outside your unit.)

Owner's Name:		Unit#:		
Property Address:	PH #:	Home:	Work:	
Email address:				
Proposed Alteration:				
General description/commer	its, those that are applicable for a posit		cation:	
□ Building permits (w □ Construction details □ Materials and finish □ Copy of property su □ Cross sections and el	or shop drawings. specifications. rvey with location of alteration drawn evation. sting structure, photographs from all ar	in.		
Signature of Unit Owner:				
*DO NOT	WRITE BELOW THI\$ LINE - I	OR USE BY BOA	RD OF DIRECTOR\$	
☐ APPROVED AS IS	□APPROVED WITH STIPULATIONS	□DISAPPROVED	Date Received://	
Comments:				
Signature of Officer.	T:	lo.	Date: / /	