APPLICATION SANS SOUCI FIRST ASSOCIATION, INC.

ARCHITECTURAL CHANGE REQUEST

Name	Property A	Address	
Owners Home Address (if different)		
City, State, Zip (if differe	nt)		
Home Phone	Work Phone	Fax	
proposed improvement specifications, material Committee in order to	s, alterations or changes to s, location and any other make a decision. Use the b ear when completed. You wil	ALTERATION. Please outline in detail a your condo. Include color(s), size(size) pertinent information needed by the ack of this form to sketch the proposed be notified in writing of the decision	s), he ed
	e: Projected Cor		
necessary Building Perm by the Board of Director in the letter of approval portion of the Associatio	its, Variances, and/or observir s I agree to make the changes l. All improvements must be ons property is disturbed or da	responsibility for obtaining any and any all local zoning ordinances. If approve under the terms and conditions specific on my property or property lines. If any maged by either myself or my contractors common elements to their original	ed ed ny or,
		Date:	
	Date Received:		
Your request for the abo	ve change, addition or improv	rement has been:	
Approved to	o the conditions on the attach d, see attached letter	ed letter	
PLEASE RETURN TO: SA	NNS SOUCI FIRST ASSOCIATION c/o Jefferson Property Mar Attn: Lynette Remick-Walk P.O Box 67	nagement	

Jefferson, MD 21755 Phone: 301-969-0405 Fax: 301-969-6196