

RIVERVIEW AT COLLEGE POINT Condominium III

P.O. Box 564041, College Point, NY 11356 (718) 461-4131 – riverviewcondo3@yahoo.com

ARCHITECTURAL & LANDSCAPING REQUEST FORM

In accordance with the Architectural & Landscaping Covenants, Conditions & Regulations, please submit a description of the planned improvement project. Please be specific, and include as much information that applies such as dimension, materials, color, plans and any other specifications you feel will be useful. Also include photos (if applicable) or any other supporting documents.

OWNER/PROPERTY INFORMATION	
Name:	Phone Number:
Mailing Address:	
City/State/Zip:	
Riverview Condominium	III Unit Address:
Phone Number:	Cell Phone:
E-mail address:	Proposed Start Date:
	CONTRACTOR INFORMATION
Company Name:	Phone Number:
Mailing Address:	
City/State/Zip:	
Proposed Start Date:	Completion Date:
PROPOSED IMPROVEMENTS	
	Mail request to above address or email it to us at <u>riverviewcondo3@yahoo.com</u>
of the responsibility for obtain agree to make the changes un property lines. If any portion	Riverview Condominium III Condo Association of the above changes/maintenance/repairs does not relieve me ning any and all necessary building permits, variances and observing all local zoning ordinances. If approved, I der the terms and conditions specified in the letter of approval. All changes will be on my property or of the Condo Association's property is disturbed or damaged by my contractor, agent, or myself, I agree to its original condition at my expense.
Applicant Signature:	Date: