

Fair Lakes Condominium Association

SUBJECT: Modifications, Alterations and Additions

TO: Fair Lakes Condominium Association
c/o Select Community Services
12701 Fair Lakes Circle, Suite 400
Fairfax, Virginia 22033
Fax: 703-631-9786

FROM: Name _____
Address _____

Phone _____
E-Mail Address _____

Approval is requested to make the modification, alteration or addition described and depicted below (or on additional pages, as necessary). Include such information as dimensions, materials, colors, design, location, graphics or pictures, if available, is sufficient detail to allow a decision. Please review your governing documents for guidelines prior to submitting your application.

Date Received: _____

Board of Directors:

_____ Approved

_____ Disapproved for the following reasons:

Signature _____ Title _____