



Farm Condominium Association

c/o Trio Property Management
P.O. Box 106
Niwot, CO 80544

Architectural Change Form

Owner Name: _____ Date: _____

Unit Address: _____ Telephone: _____

Description of Improvement:

Color: _____ Location: _____

Dimensions: _____ Structural Material: _____

Contractor: _____ Approx. Cost: _____

A detailed drawing of all improvements must be provided with the application, showing the location and dimensions of the proposed change

The Architectural Change Application is **valid for 120 days** from the date signed by the Reynolds Farm Board of Directors. If the project is not completed or time lapsed before work begins, this application must be re-submitted by the unit owner. Notification of start and completion must accompany the application.

I, _____, acknowledge that myself and any future owners of this property, will be totally responsible for any damage from the improvement and for all needed maintenance repairs. I am also responsible for and agree to obtain all necessary licensing and permits that desired improvements requires.

Architectural Change Committee		
Chair Person Signature: _____	Approved: _____	Not Approved _____
Comments for Compliance: _____		

Board of Directors		
Signature of President: _____	Approved: _____	Not Approved _____
Refer to Board Minutes dated: _____		
Inspection by Architectural Change Committee		
Signature of Chair Person: _____	Dated Inspected: _____	
Compliant: _____ Non-Compliant: _____	Copy of Permit (if needed) _____	