



*Provide a narrative Description of Changes or Modifications:*

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*The changes as proposed shall meet any and all codes, permits or other requirements deemed necessary by County, State, or other governmental Authority. I will be responsible for complying with all license, permit or code provisions required by law.*

\_\_\_\_\_  
*Unit Owner's Signature*

\_\_\_\_\_  
*Date*

**(AFTER SIGNING, SUBMIT TO PROCOM FOR APPROVAL BY THE ARCHITECTURAL CONTROL COMMITTEE.)**

**DISPOSITION:**

**APPROVED**

**DENIED**

**APPROVED SUBJECT TO THE FOLLOWING CONDITIONS:**

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*The Association is not responsible for permits, licenses or any other requirements controlled by any governmental authority.*

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*Chairman, Architectural Committee*

\_\_\_\_\_  
*Date*

**MAIL TO:**

**PROCOM**

**1111 Benfield Blvd. Suite 110, Millersville MD 21108**

**OR FAX TO 410-721-4854**