

**MOUNTAIN PLAZA CONDOMINIUM ASSOCIATION**  
**Remodeling of Condominium Unit**  
**REQUEST FORM**

**Owner:**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Numbers (home) \_\_\_\_\_ (business) \_\_\_\_\_ (fax) \_\_\_\_\_

(cell) \_\_\_\_\_ Unit \_\_\_\_\_

Property Address \_\_\_\_\_

**Owner's Representative (if applicable)**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Numbers (home) \_\_\_\_\_ (business) \_\_\_\_\_ (fax) \_\_\_\_\_

(cell) \_\_\_\_\_

**General Contractor**

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone Numbers (business) \_\_\_\_\_ (fax) \_\_\_\_\_

(cell) \_\_\_\_\_

**Approvals:**

**Approved:**

**Dates**  
**Approved**

Compliance Review

\_\_\_\_\_  
Signature of Director

Completion Review

\_\_\_\_\_  
Signature of Director

\_\_\_\_\_  
Property Management / Date

\_\_\_\_\_  
Owner or Owners' Representative / Date