

# COLONY COUNTRY ON PARLIAMENT (CCOP)

## ARCHITECTURAL CHANGE / CONSTRUCTION APPLICATION

### APPLICANT INFORMATION:

UNIT NUMBER _____	DATE _____
CONDO OWNER / APPLICANT NAME _____	
PHONE _____	EMAIL ADDRESS _____

### CONTRACTOR INFORMATION:

NAME _____	LICENSE# _____
ADDRESS _____	
PHONE _____	EMAIL ADDRESS _____

PROJECT START DATE _____	PROJECT END DATE _____
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### PROPOSED CHANGES:

KITCHEN	BATHROOM(S)	LIVING / DINING	BEDROOM(S)	WINDOWS/ BALCONY	OTHER
<input type="checkbox"/> Cabinet replacement <input type="checkbox"/> Flooring replacement <input type="checkbox"/> Electrical work <input type="checkbox"/> Plumbing work <input type="checkbox"/> Walls/Ceiling <input type="checkbox"/> Other	<input type="checkbox"/> Bathtub-Shower removal and/or replacement <input type="checkbox"/> Flooring replacement <input type="checkbox"/> Electrical work <input type="checkbox"/> Plumbing work <input type="checkbox"/> Walls/ Ceiling <input type="checkbox"/> Other	<input type="checkbox"/> Flooring replacement <input type="checkbox"/> Electrical work <input type="checkbox"/> Walls/Ceiling <input type="checkbox"/> Other	<input type="checkbox"/> Flooring replacement <input type="checkbox"/> Electrical work <input type="checkbox"/> Walls/Ceiling <input type="checkbox"/> Other	<input type="checkbox"/> Window replacement <input type="checkbox"/> Balcony	<input type="checkbox"/> Other Work (PLEASE detail below)

### DETAILED DESCRIPTION OF PROJECT (attach additional sheet if necessary)

**PLEASE ATTACH THE FOLLOWING TO THIS APPLICATION:**

- 1.Detailed description of the project, including dimensions, sketches, materials, finish, pictures, colors, etc.
- 2.Architectural drawings
- 3.Copy of engineering report, if applicable
- 4.Unit owner Proof of Insurance
- 5.Contractor Certificate of Insurance (CIO)
- 6.Signed Homeowner-Contractor Agreement

**HOMEOWNER AGREES TO THE FOLLOWING:**

- 1.To obtain all required permits and provide copies of said permits to the CCOP board, **prior** to the start of the project.
- 2.To strictly comply with all CCOP Declarations, Bylaws, Rules and Regulations.
- 3.To indemnify and hold harmless the CCOP Association, its unit owners, Board of Directors, Association employees and Management Company from any loss, damage, liability, judgements, court costs, attorney's fees, interest, or any other costs or penalties arising from this project.
- 4.To permit Management/ Building Maintenance access to unit for purposes of enforcement of this application.
- 5.I agree that all work for this project must be performed between the hours of **8:00am to 6:00pm, Monday through Saturday- NO WORK MAY BE PERFORMED ON SUNDAYS, THANKSGIVING DAY, or CHRISTMAS DAY.**
- 6.I agree I will not remove any walls or portion of walls in my unit.
- 7.I acknowledge that if this request is approved, any deviation from what has been approved must also be approved by the Board prior to making the change- otherwise I may face a penalty and be required to return the change to its original state and would be held responsible for all fees and charges.
- 8.I agree that starting this project before approval is received could result in the Association requiring that the property be restored to its condition prior to commencing the project.
- 9.I agree that all work must be completed within 120 days of receipt of project approval.
- 10.I agree to make certain that any hired contractor carries General Liability, Worker's Compensation Insurance and has a valid license to perform work within Mt Prospect, IL.
- 11.I agree and will ensure that my contractors will not use the garage for their vehicles.
- 12.I agree and will ensure that my contractors will haul away all construction trash and debris. This includes all remodeling materials such as cabinets, carpeting and padding, tile, box cartons, etc. **Under no circumstances may these materials be placed into any of the building trash receptacles, trash containers and/or recycling bins.**
- 13.I agree that failure to comply with the above requirements may result in the revocation of the approval of this application. Should this application be revoked, I agree to restore my property to a condition that existed immediately before approval of this application. All necessary costs to restore my property will be at my expense, including but not limited to: construction and material costs, attorney's fees, court costs, permit fees, etc. Management will have the right and authority to enter my property to oversee repairs, should it fall into a state of disrepair, and which is not corrected within 14 days after written notice.
- 14.Violations of any of the above will incur a fine of \$250 per incident to the unit owner. An additional \$250 fine will be assessed for each month the violation is not corrected.

**This form is to be completed by the homeowner and submitted to i.Management for approval prior to the commencement of any work. Please allow thirty (30) days upon receipt for a decision. If you will be using heavy equipment garbage dumpsters, Dump Truck, Bob Cat, Fork Lift, Front End Loader, etc., it is the responsibility of the home owner to take precautions to ensure no damage is done to the roadway, sidewalks, and any other common areas, or the homeowner will be held responsible for restoring such areas to their original state.**

Homeowner Signature \_\_\_\_\_ Date \_\_\_\_\_

Homeowner Signature \_\_\_\_\_ Date \_\_\_\_\_

☐ Application Approved

☐ Application Denied

CCOP Board Signature \_\_\_\_\_ Date \_\_\_\_\_



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