

# Mendon Square Office Park

## VARIANCE REQUEST

**Return or Fax to:**

Woodbridge Group  
P.O. Box 237  
Pittsford, NY 14534

FAX: 385-4693

**Requested By:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_

**To: The Board of Directors:**

I request permission to make the following changes to the exterior of my Office Condominium or to the common area of the community. I have attached a sketch of proposed changes, listed materials to be used, etc. (Please be specific. Extra sheets may be attached.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for request: \_\_\_\_\_

Length of Guarantee (if applicable): \_\_\_\_\_

Indicate any future maintenance required by the Association: \_\_\_\_\_

Affected neighbors were notified of common area involvement? \_\_\_\_\_ Yes \_\_\_\_\_ NO

Name of contractor (company) who will do the work: \_\_\_\_\_

**Contractor's certificate of insurance is attached or on file with HOA** \_\_\_\_\_ Yes \_\_\_\_\_ No

**Owner Signature** \_\_\_\_\_

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**For Board of Directors Use**

\_\_\_\_\_ Approved \_\_\_\_\_ \*Approved With Conditions (see attached) \_\_\_\_\_ Disapproved

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Latest completion date after which any approval is automatically revoked and a new variance request is necessary: \_\_\_\_\_

Comments on final inspection by Board of Directors and/or Property Manager:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**This change will \_\_\_\_\_ will not \_\_\_\_\_ become the responsibility of the unit owner financially as well as the maintenance and/or replacement.**

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