



VIKINGS CREST OWNERS ASSOCIATION Unit Modification Form

Please review the unit modification policy contained in the association governing documents (Rules and Regulations Handbook and Declarations)

Please submit this completed form with contractor insurance certificate to the Vikings Crest office or email to vikingscrestoffice@gmail.com

Written Board Approval is required prior to the start of the project

Today's Date _____

Your Name _____ **Unit#** _____

Contractor Completing Work _____

Contractor Phone _____

Projected Start Date _____ **Projected End Date** _____

Please provide a description of the proposed work. Attach any additional documents or photos.

By signing, you agree to abide by the governing documents of Vikings Crest Owners Association

Signature _____ **Date** _____