



**SKYLINE SQUARE CONDOMINIUM**  
 5503 Seminary Road, Falls Church, VA 22041  
 Phone: (703) 379-3992

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

To: Board of Directors  
 Via General Manager

Re: Request for Architectural Change

Pursuant to Article IX, Section 2 of the by-laws of Skyline Square Condominium, I/we request authorization to make additions, alterations or improvements to **UNIT# \_\_\_\_\_** as outlined in the attached plans/specifications.

Printed Owner Name(s): \_\_\_\_\_  
 \_\_\_\_\_

Signature(s): \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Business Phone #: \_\_\_\_\_

**FOR MANAGEMENT/ENGINEERS**

Date Received by Management \_\_\_\_\_ Date Reviewed by Engineer \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Recommend:            **Approval**            **Disapproval**

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**FOR B.O.D. REPRESENTATIVE OR ARCHITECTURAL COMMITTEE REPRESENTATIVE**

Date reviewed \_\_\_\_\_

Recommend:            **Approval**            **Disapproval**

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_