

## OGHC - SUITE ALTERATION REQUEST FORM

Name(s): \_\_\_\_\_

Unit #: \_\_\_\_\_

Email address: \_\_\_\_\_

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

Is this request for a permanent alteration?                      Yes                       No

Briefly describe the proposed suite alteration:

(attach additional pages if necessary, include schematic plans, and detail all materials and products to be used)

Name of person/company doing the alteration: \_\_\_\_\_

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

My/Our signature(s) constitute agreement to abide by the terms and conditions of the *OGHC Alterations and Improvements Policy* regarding any alterations and/or improvements I/we undertake in this suite. I/We understand that the Maintenance Committee must approve ANY changes to the plans as submitted.

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Signature	Date
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Signature	Date
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When this form is completed and signed, either:

1. Scan and email it to [oldgracehousingcoop@gmail.com](mailto:oldgracehousingcoop@gmail.com)    Subject Line: Maintenance Committee
2. Mail it to Maintenance Committee, Old Grace Housing Co-op, 100-200 Arlington Street, Winnipeg MB R3G 0W6. Co-op residents may deliver the form by hand to the co-op office.