



Mariner's Mark

A Condominium On The Chesapeake

APPLICATION FOR ARCHITECTURAL CHANGE

Please return completed application to: Tanya Gasser, CMCA®, AMS®
Architectural Review Committee/Mariner's Mark
2224 Va. Beach Blvd., #201, Va. Beach, VA 23452
Fax: (757) 486-6988
tgasser@theselectgroup.us

Submitted by:

Name: _____

Address: _____

Telephone: (Day) _____ (Night) _____

Description of Request (Give full details of purpose and/or reason for the request, type and color of materials to be used, location on the property, supportive/descriptive data, etc. - use back of form if necessary):

If the request is for a change in paint color, attach a sample and model number of the paint or stain to be used on given surface. If the request is for a structural change, attach a sketch or architectural plan.

Acknowledgement of Adjacent Homeowners: This acknowledgement indicates an awareness of the intent and does not constitute nor indicate approval or disapproval.

Name _____

Name _____

Address _____

Address _____

Name _____

Name _____

Address _____

Address _____

General Contractor Contact Information: It is imperative the association be aware of contractors on the premises should an issue or question arise.

Contractor Name _____

Phone _____

ACKNOWLEDGMENTS:

- Nothing herein contained shall be construed to represent that alteration to land or buildings in accordance with these submitted plans shall violate any of the protective covenants nor any of the provisions or Building and Zoning Codes of the City of Virginia Beach to which the above property is subject. Further, nothing herein contained shall be construed as a waiver or modification of any said restriction.
- The Code of the City of Virginia Beach for Building Inspections requires that you file an application for a building permit for structural changes.
- I understand and agree that no work on this request shall begin until written approval is received by me from the Architectural Control Committee and/or the Board of Directors.
- This application usually takes no longer than 30 days for complete review and for an answer to be delivered to the applicant. In the event additional information is required, the Committee or Board will notify the applicant directly.
- A copy of this application shall be returned to you after review by the Architectural Control Committee and/or the Board of Directors.

Owner's Signature: _____

Date: _____

PLEASE DO NOT WRITE BELOW THIS LINE

Date Received: _____ Received By: _____

Date reviewed by ACC: _____ Committee Chair: _____

Recommendation of ACC: _____

Date presented to Board of Directors for Review: _____

Decision of the Board of Directors: _____

Approved/Disapproved: _____

Date Applicant Notified of ACC and/or Board of Director's Decision: _____

**Please return completed form to The Select Group at the address or fax number above
or email it to cdoneff@theselectgroup.us**