

# ARCHITECTURAL CHANGE REQUEST FORM

Please submit the completed form and all required documentation. All owners must sign this application. Modifications may not commence prior to receiving written approval.

NAME OF OWNER (s):			DATE:	
ADDRESS:				
TELEPHONE: (h)	(w)		(c)	
DATE MODIFICATION TO BE	STARTED:	T	O BE COMPLETED:	
WORK WILL BE DONE BY:	□ НОМЕ	OWNERS	☐ CONTRACTOR	
In accordance with the Declarat covering the property above, I/v modification(s) or addition(s).			`	,
APPLICATION FOR: (Check	appropriate wo	rk.)		
Structural Modification (sate) flags, etc.) Flooring Landscaping Wall Removal Wall Addition Countertops  DESCRIPTION OF MODIFICAT		Room Built Interi Addi Other	room Fixtures on Conversion -ins or Doors tional Wiring	
Please attach a diagram of the pro	posed modifica	tion showing	exact location in unit as we	ell as a

description of all materials to be used, including colors, and measurements.



## **Architectural Change Request Form – Page 2**

#### **OWNERS'S ACKNOWLEDGEMENT:** I/We understand that:

- 1. Material contained herein will represent alterations that comply with zoning and building codes of Newport News to which the above property is subject. Further, nothing contained herein will be construed as a waiver or modification of such ordinances. The owner is responsible for obtaining the necessary permits prior to commencement of construction.
- 2. No work will commence until owner has received written approval from the Association. Any construction or alteration before approval of this application is not allowed, and if any alterations are made, I/we may be required to return the property to its former condition at my/our own expense; and that I/we may be required to pay all legal expenses incurred.
- 3. Approval is contingent upon all work being completed in a professional manner and any alteration or modification that is not finished in such manner and in accordance with the approval granted may be required to be removed or repaired at the homeowner's risk and expense, including any legal fees required to enforce this acknowledgement. Members of the Board or the management agent may make routine inspections.
- 4. Any variation from the original application must be resubmitted for approval. A copy of this request will be retained on file and made part of the permanent property record.
- 5. Any damage to the common elements as a result of said change will be the sole responsibility of the unit owner requesting said modification and all costs to repair/replace/restore said common elements will become that unit owners responsibility.
- 5. I/we acknowledge that I/we will be solely liable for any claims, including without limitation, claims for property damage or personal injury which result from the requested addition or modification. I/we hereby indemnify the Association, Board, the Architectural Committee and the management company from and against any and all such claims. Moreover, I/we accept responsibility for all maintenance, repair and upkeep of said addition or modification.

Signature of Owner	Signature of Owner	
Number of attachments:		



### **Architectural Change Request Form – Page 3**

**Restrictive Covenants** – As part of the documents you received when you purchased your home was a copy of the <u>Declarations of Covenants</u>, <u>Conditions</u>, <u>Restrictions and Easements</u>. This document sets out a basic list of restrictions that were designed to insure an orderly and well-maintained community. All owners have agreed to abide by this document as a condition of their purchase.

Modifications - All changes to a homeowner's property must be submitted for review and approval. No work should begin prior to having received a written approval of your project from the Association, nor should any work vary from the proposal approved. We suggest the following:

- Submit your application early.
- **Be sure your application is complete and accurate.** (Missing or incorrect information slows the process for everyone. Accurate drawings of the proposed project will assist the board in understating the final appearance.)
- Don't start work until you have received a written approval. (you can be compelled to restore your property to its original condition at your expense)
- **Be available for clarification and discussion.** (don't submit application just before going out of town)

If you are not sure if an application is required for your project please contact management.

Return completed form to The Select Group at the address or fax number below or email to <u>jstrickland@theselectgroup.us</u>.



# **Architectural Change Request Form – Page 4**

FOR OFFICE USE ONLY:		
Date received:		
ACTION TAKEN:		
☐ APPROVED AS SUBMITTED		
APPROVED SUBJECT TO THE FOLLOWING CONDITIONS:		
☐ DENIED FOR THE FOLLOWING REASONS		
Date Notification Sent:		