## ARCHITECTURAL CHANGE REQUEST FORM INSTRUCTIONS

Please follow the instructions carefully to prevent delays in processing and approval.

- Applications can be sent in via U.S.P.S. to the address provided below or emailed to <u>alisk@coventrygrp.com</u>
- 2) Provide ALL of the required information requested on the following pages.
- 3) Be as specific as possible. Add any supporting documentation/pictures to the request so that an understanding of what the architectural change is can be made clear.
- 4) If your project consists of multiple improvement projects, please submit each project on a separate form.
- 5) You will be notified in writing of the decision of the Board of Directors within forty-five (45) days of receipt of your completed documents. By approving this request, the Board of Directors and Coventry Group are not assuming any responsibility for the safety, construction, operation, maintenance, accident, injury or claim that may arise throughout any stage of this change or thereafter.

\*\* DO NOT begin construction or modification until you have received this approval from the Board\*\*

## SUBMISSION CHECKLIST:

_	Application	
_	Supporting documentation (pictures, plat, etc	.)

Please send packet to: Carlisle Estates HOA

c/o Coventry Group Community Management, Inc.

P.O. Box 2580

Winchester, VA 22604

## CARLISLE ESTATES HOMEOWNERS ASSOCIATION, INC. ARCHITECTURAL CHANGE REQUEST FORM

Name		_		
Property Address				
Owner's Mailing Address (if different)				
City, State, Zip (if other than Winchester)				
Phone	Email			
Summary of Proposed Change				
DESCRIPTION of PROPOSED EXTERIOR all improvements, alterations or changes y to make a decision, please include color(s) information. Please be as specific as possiproposed alteration, as it will appear when of Directors within forty-five (45) days of Board of Directors is not assuming any resinjury or claim that may arise throughout a	ou are proposing to your lo b, size(s), specifications, ma ible. On the back of this for a completed. You will be no receipt of your completed of sponsibility for the safety, c	t or home. In order for the terials, location, and any other or on a separate sheet of otified in writing of the decidocuments. By approving the onstruction, operation, main	Board of Directors her pertinent paper, sketch the sion of the Board his request, the	
Estimated Beginning Date	Estim	Estimated Date of Completion		
I understand that approval of proposed channecessary Building Permits, Variances, an Directors, I agree to make the changes understand that all improvements must be and all disturbance or damage to Association	d/or observing all local zon ler the terms and conditions on my property or property	ing ordinances. If approved as specified in the approva lines. I agree to accept res	d by the Board of l document. I	
Signature of Homeowner Date				
SUBMIT COMPLETED DOCUMENTAT	Carlisle Estates HOA	nmunity Management, Inc.		
BOARD OF DIRECTORS USE ONLY:				
Your request for the above addition or alte Approved without exception Approved with the following term		Date Received:		
Denied for the following reason(	(s):			
By: Signatures	Printed Names		Date	