ARCHITECTURAL CHANGE REQUEST FORM INSTRUCTIONS

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

- 1) ALL applications must be sent in via U.S.P.S. to the address provided.
- 2) Provide ALL of the required information requested on the following pages.
- 3) If your project consists of multiple improvement projects, please submit each project on a separate form.
- 4) 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.

** To avoid incurring fines, DO NOT begin construction or modification until you have received this approval from the Board**

Winchester, VA 22604

SUBMISSION CHECKLIST:

_ Application	
_ Supporting documenta	tion (pictures, plat, etc.)
Please send packet to:	Copperfield HOA c/o Coventry Group Community Management, Inc. P.O. Box 2580

COPPERFIELD 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		
all improvements, alterations or changes you at to make a decision, please include color(s), signiformation. Please be as specific as possible proposed alteration, as it will appear when conformations within forty-five (45) days of rec	are proposing to your lo ze(s), specifications, mae. On the back of this formpleted. You will be noteipt of your completed consibility for the safety, c	orm or on a separate sheet of paper, sketch the otified in writing of the decision of the Board documents. By approving this request, the construction, operation, maintenance, accident,
Estimated Beginning Date	Estim	nated Date of Completion
necessary Building Permits, Variances, and/or Directors, I agree to make the changes under the	r observing all local zon the terms and conditions my property or property	s as specified in the approval document. I vilnes. I agree to accept responsibility for any
Signature of Homeowner		Date
C I	COPPERFIELD HOA	mmunity Management, Inc.
BOARD OF DIRECTORS USE ONLY:		
Your request for the above addition or alteration has been:		Date Received:
Approved without exception Approved with the following terms	and conditions:	
Denied for the following reason(s):		
By: Signatures	Printed Names	Date