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) Be as specific as possible.
- 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.

** To avoid incurring fines, 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:

Lakeview Townhouse Group c/o Coventry Group Community Management, Inc. P.O. Box 2580 Winchester, VA 22604

LAKEVIEW TOWNHOUSE GROUP, INC. ARCHITECTURAL CHANGE REQUEST FORM

Name			
Owner	r's Mailing Address (if different)		
City, S	State, Zip (if other than Wincheste	r)	
Phone		Email	
descrij Board other p paper, decisio approv operat	ption of all improvements, alterat of Directors to make a decision, pertinent information. <i>Please be</i> sketch the proposed alteration, a on of the Board of Directors with ving this request, the Board of Dir ion, maintenance, accident, injury	ERIOR CHANGE OR ALTERATION: Please attach a detailed tons or changes you are proposing to your lot or home. In order for to belase include color(s), size(s), specifications, materials, location and <i>as specific as possible</i> . On the back of this form or on a separate she is it will appear when completed. You will be notified in writing of the n forty-five (45) days of receipt of your completed documents. By sectors is not assuming any responsibility for the safety, construction or claim that may arise throughout any stage of this change or there Estimated Date of Completion	d any eet of he , eafter.
I unde: necess Directo unders and all	rstand that approval of proposed ary Building Permits, Variances, ors, I agree to make the changes stand that all improvements must I disturbance or damage to Assoc	change(s) does not relieve me of the responsibility for obtaining any and/or observing all local zoning ordinances. If approved by the Bo under the terms and conditions as specified in the approval document be on my property or property lines. I agree to accept responsibility ation's property by either my contractor(s) or myself.	and all bard of t. I for any
-	IIT COMPLETED DOCUMENT		
	RD OF DIRECTORS USE ONI request for the above addition or a Approved without exception Approved with the following	Date Received:	
	Denied for the following reaso	on(s):	
By:	Signatures	Printed Names	Date