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:

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Supporting documentation (pictures, plat, etc.)

Please send packet to: Sorrell Court HOA

c/o Coventry Group Community Management, Inc.

P.O. Box 2580

Winchester, VA 22604

SORRELL COURT HOMEOWNERS ASSOCIATION, INC. ARCHITECTURAL CHANGE REQUEST FORM

Owner		Property Address					
Owner	's Mailing Address (i	f different)					
City, S	tate, Zip (if other tha	n Winchester)					
Home 1	Phone	Daytime Phone		Email			
PROPO Please	OSED EXTERIOR C	HANGE OR ALTERATION:	ns or changes you are pro	oposing to your lot or home	<u> </u>		
	cr for the Architectura Color(s) Specifications Materials Sketch of proposed	I alterations as it will appear when con	a decision, please providize(s)	le the following informatio	n:		
•		ocation of proposed alterationt t information:					
decisio request or clair	on of the Architectura t, the ARC or Board on that may arise thro	sible. Incomplete information will de I Review Committee within forty-fiv of Directors is not assuming any responsible to the I Review, DO NOT begin construction	re (45) days of receipt of onsibility for the safety, coreafter.	your completed docume onstruction, operation, mai	nts. By approving this intenance, accident, injury		
Estima	ted Beginning Date _		Estimated Date o	f Completion			
Variander the lines.	ces, and/or observing he terms and condition I agree to accept resp	f proposed change(s) does not relieve all local zoning ordinances. If approons as specified in the approval docur onsibility for any and all disturbance	oved by the Architectural nent. I understand that al or damage to Association	Review Committee, I agre I improvements must be on 's property by either my co	e to make the changes n my property or property ontractor(s) or myself.		
Signatu	are of Homeowner		Date				
SUBM	IT COMPLETED D	P.O. Box 2	ry Group Community Ma	anagement, Inc.			
		EW COMMITTEE USE ONLY:	Date Received:				
	Approved without	exception e following terms and conditions:					
	Denied for the following	owing reason(s):					
Ву:	Signatures	Pr	inted Names	Date			