Weathersfield Home Owners' Association

REQUEST FOR PROPERTY MODIFICATION APPROVAL

Please submit this request, **complete with appropriate signatures** and all attachments to the Weathersfield HOA Property Management Office or Weathersfield HOA Architectural Committee Chair person.

DATE:		
PROPERTY OWNERS NAME:		
PROPERTY ADDRESS:	POST NO.	
TELEPHONE NUMBER: HM/Mobile #	WK#	
EST. START DATE:	EST. COMPLETION DATE:	
1. Reason for the change/addition/removal		

2. Narrative description of the proposed home improvement change. Cite materials and color(s) to be used. State similarities to existing structures as appropriate. Use a separate sheet of paper if necessary. Provide photos or brochures to illustrate materials.

NAME OF CONTRACTOR(s) who will complete this project.

- 3. Please attach drawings to this request showing all proposed improvements including relationships to existing structures, landscaping and lot lines. Two views are needed to clearly show proposed improvements:
 - A. Plot Plan "top down view" the improvement should be drawn on a copy of your lot survey to show where the change will be placed.
 - B. Elevation(s) "side, front, and rear view(s)" one or more as necessary.
- 4. Attach paint or vinyl siding samples, if applicable.
- 5. A building permit and inspection may be needed if changes are extensive. Please submit permit if applicable. (NO work can commence until all permits are in hand.)
- 6. When the Architectural Review Committee (the "committee") reviews this request, your neighbors have the right to comment and present views about your requested improvements. This is not for their approval; it is only to make them aware that there will be changes. **Please obtain signatures** from all property owners

having adjoining lot lines with your property, and all property owners who would reasonably view the improvement from their property; that is, in neighboring closes. If you object to obtaining the signatures, please state the reason. If the signatures are missing, the request can be denied as incomplete. If this should happen, you would need to resubmit with the required information to get the request reviewed for approval.

I acknowledge that the requesting property owner has shown (me/us) the Property Modification Request form for the proposed improvement(s) described on the form. I understand that (I/we) may make verbal or written comments directly to the committee. **Neighbor signature(s) required below:**

DATE	PRINTED NAME	SIC	GNATURE	ADD	RESS	
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Any additiona	Il information you, the a	pplicant, wis	h to provide th	e committee.		
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Signature of A	Applicant	Date				
PLEASE NO	TE: ALL PROJECTS	MUST BE (COMPLETEI) WITHIN 1	2 MONTHS OF APPRO)VAL
ARCHITEC	FURAL COMMITTE	E: APPRC	OVED	DISAPPR	OVED	
	APPI	ROVED W/R	ESTRICTION	VS (s	ee below)	
Signed:					Date:	
COMMENTS	:					
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