

centerpoint

Community Association Management

Architectural Change Application

Please know it is the goal of the committee to respond to submissions in a timely manner. This process may take up to 30 days depending on the specific provisions outlined in your community's governing documents. Please refer to those documents prior to making any architectural change request.

Name: _____

Community: _____

Address: _____

City/State/Zip: _____

Lot #: _____

Email: _____

Phone(s) (H): _____ (W): _____

Fax: _____

Estimated start date: _____ Estimated completion date: _____

Name of contractor/person performing the project work:

In accordance with all Association governing documents, covenants, easements, charges, liens and the Association's rules and regulations, I request consent to make the following changes, alterations, renovations, additions and/or removals to my unit/lot.

Project Description:

Is this an amendment to a previous request? _____

CHECKLIST OF REQUIRED DOCUMENTATION FOR PROJECT SUBMISSION

Two application packets must be submitted. This includes the completed/signed application along with the following additional information. Incomplete submission packets will be denied:

1. Written description of project if further explanation is needed apart from application.
2. Survey location report marking location of the project in relation to the property lines, easements and existing structures.
3. Construction plans, blue prints and/or landscape designs if applicable.
4. Specific information regarding materials, colors, style and dimensions.
5. Any additional details relevant to the project.

I understand that according to the declaration and the rules and regulations, the committee will act on this request and provide me with a written response of their decision. I further understand and agree to the following provisions:

1. No work or commitment of work will be made by me until I have received written approval from the Association. Failure to comply with the documents or starting work prior to receiving written approval may result in suspension of the project and/or alteration or removal of such project.
2. All work will be done at my expense and all future upkeep will remain at my expense.
3. All work will be done expeditiously once commenced and will be done in a good workman-like manner by a contractor or myself. Failure to complete the project within ninety (90) days of approval may result in required application resubmittal to the committee.
4. All work will be performed at a time and in a manner to minimize interference and inconvenience to other homeowners.
5. I assume all liability and will be responsible for all damage and/or injury, which may result from performance of this work.
6. I will be responsible for the conduct of all persons, agents, contractors, and employees who are connected with this work.
7. I will be responsible for complying with, and will comply with, all applicable federal, state, and local laws; codes; regulations; and requirements in connection with this work, and I will obtain any necessary governmental permits and approvals for the work. I understand and agree that the Association governing the unit/lot, its board of directors, its agent and the committee have no responsibility with respect to such compliance and that the board of directors' or its designated committee's approval of this request shall not be understood as the making of any representation or warranty that the plans, specifications, or work comply with any law, code, regulation, or governmental requirement.
8. If my unit/lot adjoins Association common area or contains any easements, I understand the obligations and risks and certify to abide by all restrictions in association governing documents, plat covenants and restrictions, and any local or county laws, codes or regulations.

Signature: _____ **Date:** _____

<p>FOR COMMITTEE USE ONLY:</p> <p>Date Submission Received: _____ Rec'd By: _____</p> <p>Submission Packet Complete: Yes or No</p> <p>If No, action taken: _____</p> <p>Committee Decision: Approved _____ Denied _____</p> <p>If denied, reasons for denial: _____</p> <p>Approved/Denied by:</p> <p>Signature: _____ Date: _____</p> <p>Printed Name: _____</p>

All submission packets should be mailed to:

Centerpoint Community Association Management | 4630 Lisborn Drive | Carmel, IN 46033
Phone 317-843-2226 | Fax 317-805-7361