



AUTUMN CHACE HOMEOWNER'S ASSOCIATION

EXTERIOR MODIFICATION REQUEST

Date: _____

FROM: _____

EMAIL ADDRESS: _____

UNIT NUMBER and STREET ADDRESS: _____

ESTIMATED START DATE: _____

HOME PHONE: _____ DAYTIME PHONE: _____

I would like to make the following change(s) to the exterior of my unit (attach additional pages if necessary). Please describe your change in detail and be sure to include type of materials, style, color, dimensions (height/width depth), etc. If your project requires a dumpster or contractor trailer, you must indicate that on your request below.

1. _____

2. _____

Is this change consistent with the Associations Architectural Standards? _____

Is this change consistent with the community's Williamsburg style? _____

I have discussed the proposed change with my immediate neighbors and believe that they are supportive of this change (yes or no) _____ Neighbor's unit number(s)? _____

Permission is hereby granted for members of the Autumn Chace Homeowners Association Board and their delegates to enter the property to make reasonable observations and inspections of the requested modification and completed project. The Applicant represents by act of entering into the review process with the Autumn Chace Board that all representatives of the Applicant, including, but not limited to, Applicants architect, engineer, contractors, subcontractors, and other agents and employees shall be made aware by the Applicant of all applicable requirements of the approval specifications provided by the Board and shall abide by these Procedures and specifications. The Guidelines and the Covenants, Conditions and Restrictions apply with respect to approval of development plans and specifications.

Homeowner Signature _____

FOR BOARD USE ONLY

Date request received by Board _____ () In person () By mail () By Fax
() By eMail

Response Date _____ Board Signature _____

() Conditional Approval * () Disapproved*

*Explanation _____

