

Cavalier Townhouse Condominium Association

P.O. Box 7368, Wilmington, DE 19803

Phone (302) 293-8093 - Fax (302) 475-7664

ARCHITECTURAL CHANGE REQUEST

TO THE APPLICANT: This form, with supporting illustrations/drawings, must be sent to the CTCA and you **must receive approval before any work is done on your condominium exterior**. Your request will be reviewed **within 45 days** of receipt by the CTCA. All illustrations and drawings will be retained by the CTCA unless otherwise indicated by you. Approval of your request by the CTCA does not fulfill other obligations which might be required by County, State or National codes and/or laws. Furthermore, approval of your request does not imply satisfactory compliance with safety, mechanical, electrical, or plumbing codes.

PLEASE COMPLETE THE FOLLOWING:

1. Name: _____ Address: _____
2. Phone: _____ Date: _____
3. Email address (please print clearly): _____
4. Proposed Change: Include information as applicable: plans and specifications with illustrations showing the nature, kind, shape, color, height, materials and proposed location of the architectural change. If more space is needed, please attach this information.

5. Proposed Completion Date: _____
6. Date Received by Committee: _____

Approved

Denied

Necessary Revisions or Comments:

Approval Signatures:

Date: _____

Date: _____

cc: Architectural Review Committee / File

Completed: _____