

**ARCHITECTURAL REVIEW COMMITTEE
CHANGE REQUEST FORM**

Date: _____ Phone #: _____

Name of Homeowner: _____

Address: _____

Description of proposed change or modification: _____

Reason for proposed change or modification: _____

A sketch of the proposed alteration must be drawn to scale on a separate piece of paper, not less than 8-1/2 inches by 11 inches, with all pertinent dimensions noted. You must indicate property pins if requesting additions away from house area.

Assuming you get approval, please give the estimated start and completion dates. The ARC inspects the project when completed as per the By-Laws.

Estimated start date: _____ Estimated completion date: _____

Request denied for the following reasons: _____

Architectural Review Committee

Authorized Signature: _____

Date: _____

Following approval by the Architectural Review Committee, the homeowners are responsible for obtaining all applicable permits from the appropriate local township office.

NOTE: Completed form to be sent to the Meadow Ridge Homeowners Association at 975 Easton Road, Suite 102, Warrington, PA 18976 or Fax at 215-491-5620 or email to s.dubree@cpm975.com

Date & Initials, Received by ARC _____