

HAVENS HOMEOWNERS ASSOCIATION, INC
Architectural Change Request Form

1. Name: _____

2. Address: _____

3. Phone number & email address: _____

4. Briefly describe the proposed change: _____

5. Will there be changes or modifications in the basic utility services or existing structures to accommodate the proposed change? If yes, please explain: _____

6. Please indicate, with a Yes or No, beside any of the changes that would be made:

Electric _____	Exterior Walls _____	Telephone _____
Fencing _____	Gas _____	Patio Slab _____
Water _____	Sidewalk _____	Sewage _____
Pavement _____	TV Cable _____	Other _____

7. Please list below the major construction materials and colors that will be used in this project. Be as specific as possible. (Per our covenants, the exterior materials must match those used on the house or be sufficiently compatible.) _____

8. If the proposed change is an addition or alteration that would change the appearance of the house or the lot, please attach the following information:

- A. Plot plan indicating the location and dimensions of the project on the lot.
- B. Blue prints or working drawings of all necessary dimensions and elevations.
- C. A photograph or drawing of a similar completed project.
- D. Additional information as required by the Committee.

9. Project schedule:

A. The project will be done by: Homeowner _____ Contractor(s) _____ Both _____
If being done by contractor(s), provide the name: _____

B. Approximate project start date: _____
Approximate project completion date: _____

C. Indicate any building permits that will be required for the project: _____

10. Homeowner's Acknowledgement: I understand that under the By-Laws of the Havens Homeowners Association, Inc. and according to the Declaration of Restrictions as depicted on the recorded subdivision plat(s) for this development, the Architectural Control Committee will act on this request and provide me with a written response of its decision. I further understand and agree to the following provisions:

A. No work or commitment of work will be made by me until I have received written approval from the Committee. If alterations are made without receiving approval, I may be required to return the property to its former condition at my expense, and I may be required to pay all legal expenses and/or fees incurred by the Havens Homeowners Association and/or Committee to enforce the above By-Laws and Declaration.

B. All work will be done at my expense and all future upkeep will remain at my expense.

C. All work will be completed within 120 days of the start date and will be done in a good workman-like manner by myself and/or licensed and insured contractor.

D. All work will be performed at a time and in a manner to minimize interference and inconvenience to other home owners. All contractor/business advertising signs associated with the work will be removed immediately upon project completion.

E. I assume all liability and will be responsible for all damages and/or injury that may result for performance of this work.

F. 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 this work. I understand and agree that the Homeowners Association, its Board of Directors, its agent and/or the Committee have no responsibility with respect to such compliance and that the Board of Director's and/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.

Note: All submitted materials shall remain the property of the Association. You may wish to make a copy for your personal records.

I hereby acknowledge that I have read and understand the By-Laws of the Havens Homeowners Association and the Declaration of Restrictions as depicted on the recorded subdivision plat(s) for this development, and I will comply with these standards and requirements.

Homeowner's Signature: _____

Date: _____

This form may be mailed or emailed to the Havens Homeowners Association as follows:

Havens HOA Architectural Control Committee
1547 N. State St. #210
Greenfield, IN 46140

E-Mail: *info@yourhoahelp.com*

Do not write below this line:

Board / Committee Action:

Approved as submitted

Deferred

Additional information required: _____

Other: _____

Denied: _____

Comments: _____

Board / Committee Signature: _____ Date: _____

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