**APPLICATION FOR ALTERATION/MODIFICATION**

Please review the Community Governing Documents for specifics pertaining to the association. Your application for Alteration/Modification must be **SUBMITTED** and **APPROVED** before the project begins. Please fill out the form completely. Applications **submitted incomplete** or without **supporting documentation** will be returned without review and/or approval.

Please allow **30 days** for reviews to be completed.

Please submit your **completed** form and documents to: Management at VillagesAGR@gmail.com

**Homeowner’ Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Homeowner’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Please note: Any application that deviates from the approval plans will be inspected by the Association for compliance.***

**Type of Alteration/Modification Requested: Circle All that Apply**

**Shutters & Front Door** (must match) – Choose **one** HOA approved color below:

Rock Weed In the Navy Hunt Club Black Magic Wall Street Online Rustic Red Poinsettia Red

**Roof (House AND Garage)** – Choose **one** HOA approved color below:

Driftwood Weather Wood (or similar color which requires pre-approval)

**Landscape** (ie: patio extensions, flower bed extensions, parking pad, etc. which requires pre-approval)

**Siding** (requires pre-approval)

**Name of Company(s) Performing the Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

[ ]  **Supporting documentation attached**

\*For any questions or concerns contact Management at (614) 385-4697 OR VillagesAGR@gmail.com

**Section to be completed by the Condo Association Manager**

Application for Altercation/Modification: [ ]  Approved [ ]  Not Approved

Condo Association Manager Signature: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date:  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Notes: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Please note: Alteration/modification requests are only valid for* ***365 days*** *from the date of approval by the Condo Association Manager.*