

NORTH POINT CONDOMINIUM ASSOCIATION

APPLICATION FOR ARCHITECTURAL CHANGE

The Declaration of Flexible Condominium (§6.2) requires that you submit to the North Point Condominium Association's Board of Directors, for approval, all proposed exterior additions, changes or alterations to your condominium and/or lot. In order to be considered, your application must include detailed information describing the proposed change (typically, plans and specifications including sketches, photos, catalog illustrations, etc. showing the nature, kind, shape, color, dimensions, and materials). Please be as thorough as possible, too little information may delay the review of your application. No additions, changes or alterations are to be started without the approval of the Board.

It is understood and agreed, any change of a landscaping area, patio enlargement or patio surface change, or approved plantings, or any architectural change will now be the responsibility of the owner. The owner agrees to maintain, repair, and replace all improvements at the owner's expense. In the event the owner sells the unit, it is the owner's responsibility to disclose this fact to a prospective buyer. If a buyer does not want the responsibility, the owner must return the property to its original condition at the owner's expense. A copy of this document will be provided to a realtor listing the condo for sale and will be attached to all future Certificates of Sale.

_____	_____	_____
Owners	Address	Date of Application

Briefly describe the proposed remodeling project:

Attach one copy of your plans which will remain with your application as a permanent record.

Neighbors' Acknowledgements:

You are requested to obtain the signatures of the four (4) property owners who will be most affected by the proposed change. Signature by your neighbors indicates an awareness of your proposed change and ***does not*** constitute approval or disapproval on their part.

Name: _____
Address: _____
Signature: _____

Name: _____
Address: _____
Signature: _____

Name: _____
Address: _____
Signature: _____

Name: _____
Address: _____
Signature: _____

Please provide the name and contact information of your contractor/vendor:

Name: _____

Business Address: _____

Telephone Number: _____

Contractor's Insurance Company, Policy #, and expiration date:

What is your anticipated start date: _____

What is your completion date: _____

Signature of Owner

Date

Approval by Board of Directors
Authorized Signature

Date

Disapproval by Board of Directors
Authorized Signature

Date

Comments: (Restrictions, additional requirements, reason for disapproval)

Mail or Deliver to:
North Point Condominium Association
c/o Ken Clifton
3922 North Point Dr.
New Castle, PA 16105