Red Fox HOA

ARCHITECTURAL CONTROL COMMITTEE

Homeowner Request For Architectural Change

- The committee has 30 days to process and review the submission PLEASE PLAN ACCORDINGLY.
- NO CHANGES OR IMPROVEMENTS SHALL COMMENCE PRIOR TO APPROVAL.
- If for any reason the submission is not approved within 30 days, the application is considered denied.
- If submission is approved, Homeowner is responsible to keep record/copy for their records.
- Upon sale of the property, Homeowner is responsible for transferring a copy of all ACC approvals applying to the property to the new Homeowner.
- Please make sure ALL requested documents are included before submitting.
- Homeowner is responsible for all required permits.

I. Please complete Items 1 through 7 below:

1.	Name:	Phone:	
	Address:		Email
	Address:		
	Lot #:		
2.	Describe the proposed change:		
3.	Please list below the major construction me Be as specific as possible. (Exterior matoriginal building or be sufficiently compatible)	erials must conform to those used	

4.	Will the	e improven YES	nent affect a	any of the following i	tems: YES	NO		
	Electric Phone Gas Water Sewage TV Cab	<u> </u>	_	Exterior Walls Patio Fencing Patio Slab Sidewalks Pavements Paint Color				
5.	If YES below: Name:	, please pro	YI ovide the n	improvement extend ES NO ame, address and sig	nature o	f the affect	eted homeo	wner
6.	Will an Drainag Easeme	y part of the ge or Sevent or Lake please fill	he propose wer Easem Easement s YE	d improvement extennent, Landscape Eashown on the plot plass NOsement & Utility Access	d into ar sement, n of your	ny Commo Landscar lot?	pe Preserv	ation
7.	А.	Homeown Contractor Both: Subsequer finish date Start:	er: Nar r: Nar nt to Commes below:	vill be performed by: ne: ittee approval, please uilding permits that w	indicate	the appro		t and
7.	packet. Project A. B.	schedule: The propo Homeown Contractor Both: Subsequer finish date Start: Finish: Please ind	sed work wer: Nar nt to Commes below:	will be performed by: ne:	indicate	the approquired:		

II. The following must be included along with this form for any Request for Architectural Change:

- A. Plot Plan of your property with the improvement drawn in to scale indicating location and dimensions.
- B. Construction Plans or drawings of the proposed improvements and a photograph of a similar project/improvement.

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

Completed forms may be faxed, mailed or emailed back to Omni Management for processing.
FAX Number: 317-541-0002

Mail Address: P.O. Box 441570 Indianapolis, IN 46244

Email address: nburress@omni-property.com

Once Omni has received your ACC request, you will then receive a confirmation letter. When we have received all required documents, it may then take up to 30 days to get a response from the committee. No project should be started prior to receipt of ACC written approval.

I hereby acknowledge that I have read the above document and the Architectural Control Standards and submit the attachments for approval for improvements to my property. I understand no improvements are to start until approval by the ACC.

Homeowner's Si	gnature:	Date:
		Committee Use Only
Approved as submitted:_		_
Approved with condition	ıs:	_
Conditions to meet for co	ompliance:_	
Denied:		
Deferred:		
		on:
Date:		Signed:
	Arc	chitectural Control Committee Member
	As I	Management Agent for: Red Fox Woods Commons F

EASEMENT AND UTILITY ACCESS WAIVER

This document is an acknowledgment that	I,, the
owner of the property located at	of the
subdivision will be inst	alling an improvement that could possibly
extend into a Common Area, Utility, Drainage of	r Sewer Easement, Landscape Easement
Landscape Preservation Easement or Lake Easemen meters or equipment. I will accept full responsibility improvement if the utility company, association or the	y of any cost to remove and/or replace thi
Homeowner's Signature:	Date: