**Architectural Change Request Form**

Please submit this application and any attachments   
for review to arc@irjpm.com

Homeowner's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Property Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Homeowner's Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Homeowner’s Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Request Statement and Agreement**

I determine this proposed project to be fully compliant with the The Meadows Covenants. I request project approval by the Association and/or Architectural Committee for the following described project only. I grant permission to the Association to enter my property and inspect the project prior to, during, and upon completion of the project. I also agree to cause the proposed improvement to be properly maintained. If IRJ Property Management and/or the Architectural Committee determines this project in any way violates the existing Association Covenants, is not completed within the allotted time, or not maintained to the satisfaction of The Meadows Homeowner’s Association, I will cause the project to become completed in a manner fully compliant with the covenants and appropriately maintained or allow the Association to cause the project and my entire property to become fully compliant with the covenants and maintenance standards and reimburse the Association for all expenses associated with the compliance. I will be responsible for obtaining all necessary permits required by local governments having jurisdiction. Furthermore, I will be responsible for calling 1-800-632-4949 (Call-Before-You-Dig- Hotline) if I am planting in or near a common area easement.

***PLEASE READ CAREFULLY:*** *PROCESSING TIME FOR ARCHITECTURAL REQUESTS VARIES. PLEASE ALLOW 30-60 DAYS FROM RECEIPT OF COMPLETE APPLICATION FOR A FULL REVIEW. CONSIDER THIS TIMEFRAME WHEN SCHEDULING CONTRACTORS, ETC.*

**BEFORE SUBMITTING THIS FORM, Homeowner must reach out to the town/county to determine whether or not a permit is needed to submit their request. If a permit is needed, it must be submitted along with this form. If a permit is not needed, please provide correspondence from the town/county stating that no permit is needed for the project. This can be in the form of a formal letter or in email format. This paperwork is REQUIRED to submit your request. Failure to submit this paperwork will result in an incomplete application and the application will not be considered until all paperwork has been submitted.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   
 Homeowner Signature Date

Please have all adjacent lot owners’ sign that they have seen the plans of the proposed project:

**Name Address Phone**

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**Describe proposed changes or additions:**

*Please provide the following information/documents for your request:*

* Any sizes, styles, colors, heights & dimensions, description of materials, etc. for your project
* Attach a copy of your plot plan or sketch and indicate location of proposed exterior design change on lot in relation to house, other existing structures, and property lines.
* Any sketches, specifications, pictures, paint charts, or the like that will assist in reviewing this application.

Please note that potential screening or site restrictions, noise levels, and other privacy intrusions will be considered in review & approval of any mechanical equipment, i.e. trees restricting views and pool pumps.

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ESTIMATED CONSTRUCTION DATES: \*Start \_\_\_\_\_\_\_ Finish \_\_\_\_\_\_\_\_\_

Please make sure your contractor adheres to your schedule, since the Association can force its completion. ***\*Again, please be advised that the review process may take 30-60 days from receipt of application.***

**Other Information Regarding Project Request:**

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***Architectural Committee/Manager use only***

**Special Conditions for Approval:**

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Approved \_\_\_\_\_\_ Disapproved \_\_\_\_\_\_\_ Conditional Approval \_\_\_\_\_\_\_

(Include reason) (See above)

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

IRJ Property Management Officer And/or Architectural Committee Member