

**CHARLESTOWNE VILLAGE CONDOMINIUM, INC.  
EXTERIOR ALTERATION/CHANGE FORM**

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

HOME/WORK # \_\_\_\_\_ DATE \_\_\_\_\_

In accordance with the Charlestowne Village Condominium, Inc. Bylaws and the Association's rules and regulations, I request your consent to make the following changes, alterations, renovations, additions, removals and/or landscaping to my home. *A copy of the plans and detailed specifications, scaled drawing of what you intend to improve, change, landscape, etc. PLEASE NOTE: APPLICATIONS WILL AUTOMATICALLY BE DISAPPROVED IF THE ABOVE INFORMATION IS NOT PROVIDED.*

Description of Proposed Alteration: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand that under the Bylaws and the rules and regulations, the Board of Directors will act on this request within 60 days and provide me with a written response of their decision. I further understand and agree to the following provisions:

1. All work will be done at my expense and all future upkeep will remain at my expense.
2. All work will be done expeditiously once commenced and will be done in a good professional manner by myself or a contractor.
3. All work will be performed at a time and in a manner to minimize interference and inconvenience to other homeowners.
4. I assume all liability and will be responsible for all damage and/or injury which may result from performance of this work and restoring any damage to common property or grounds resulting from work performance.
5. I will be responsible for the conduct of all persons, agents, contractors, and employees who are connected with this work.
6. I will be responsible for complying with, and will comply with, all applicable Charlestowne Village Condominium, 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 the work. I understand and agree that the Charlestowne Village Condominium Board of Directors, its agents, and its designated committees have no responsibility with respect to such compliance; and that the Board of Directors 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.
7. The contractor is: \_\_\_\_\_
8. If approved within 60 days, the work would start on or about \_\_\_\_\_ and would be completed by \_\_\_\_\_. Applications are valid for 12 months (365 days).
9. I understand that I must contact the Board of Directors if modifications or changes to the original application are needed or upon completion of proposed change for possible verification of compliance.

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

RETURN YOUR COMPLETED FORM TO: **CHARLESTOWNE VILLAGE CONDOMINIUM, INC. c/o CVI, 6300 Woodside Court, Suite 10, Columbia, MD 21046, fax to 301-596-2082 or email to [lthomas@cviinc.com](mailto:lthomas@cviinc.com)**

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FOR BOARD USE ONLY: \_\_\_\_\_ APPROVED

\_\_\_\_\_ NOT APPROVED

Board Signature \_\_\_\_\_ DATE \_\_\_\_\_

Comments/Stipulations  
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\_\_\_\_\_