

CABIN BRANCH FOREST ASSOCIATION, INC.

P.O. Box 54. Sterling, VA 20167

Architectural Change Request

Homeowner Name _____

Address _____

Phone _____ Email _____

Type of Change

Description of Change - Attach second sheet if necessary, or drawing if a Lot improvement

I/we acknowledge and agree that I/we will be solely liable for any claims, including without limitation, claims for property damage or personal injury, which result from the requested change. I/we hereby indemnify and hold harmless the Cabin Branch Forest Association, Inc., its officers and assignees from and against any and all applicable codes and ordinances, and for obtaining all necessary permits and inspections for the requested change; and further that I/we are responsible for all maintenance, repair and upkeep of said change.

Please mail completed form to the address listed or forms may be emailed to ccommittee@cabinbranchforest.com

Signature (homeowner, all must sign)

Date

Signature

Date

Covenant Committee Review:

_____ **Approved as requested**

_____ **Denied**

CC / Board member

Date