

APPLICATION

**WILDFLOWER RIDGE HOMEOWNERS ASSOCIATION, INC.
ARCHITECTURAL CHANGE REQUEST**

Name: _____ Property Address: _____

Owner's Home Address (if different): _____

Home Phone: _____ Work Phone: _____

Single Family Townhouse

Check Type of Improvement, Change or Addition: Please check appropriate box(es)

Shed: _____ Satellite Dish: _____ Color Change: _____ Plantings: _____
Fence: _____ Patio: _____ Addition: _____ Driveway extension: _____
Deck: _____ Pool: _____ Gazebo: _____
Other: _____

***Please outline in detail all proposed improvements, alterations or changes to your lot or home. Include as much detail as possible including materials to be used, color(s), size(s), specifications, location and any other pertinent information needed by the Architectural Review Committee in order to make a decision. Provide a sketch of the change, or advertisement if available. If someone other than the homeowner is performing the work, please include their name and phone number. Note: The change MUST be drawn on a copy of your property survey (plat) to include dimensions of the change and proximity to home and property line. If you already have changes, these should be noted on the plat. Approved changes must be made within one year from the approval date. Any variance of the improvement to the originally approved application MUST be re-submitted.**

Estimated Beginning Date: _____ Projected Completion Date: _____

I understand that HOA approval does not relieve me of the responsibility for obtaining any and all required county or municipal building permits, variances, and/or observing all local zoning ordinances. If this application is approved by the Association, I agree to make the changes under the terms and conditions as specified in the letter of approval. All improvements must be on or within my property or property lines. If any portion of the Association's property is disturbed or damaged by either myself or my contractor, then I agree to be responsible for and to restore the common elements to their original condition(s).

Signature of Applicant: _____ Date: _____

ARC OR BOARD OF DIRECTORS ACTION: Date Received: _____

Approved: _____ Approved w/conditions on attached letter: _____ Denied: _____

By: _____ Date: _____

PLEASE RETURN TO: Wildflower Ridge HOA, Inc.
PO Box 1798
Martinsburg, WV 25402
progressivebookkeepers@gmail.com

ACC Comments: