WEXFORD CONSERVANCY TOWNHOME ASSOCIATION ARCHITECTURAL REQUEST FOR REVIEW FORM

10:		servancy antage C ry club Dr 22025		Date:
Prope	erty Address: _			
Sectio	on:	Lot:	Homeowner: _	
Home	phone:		Work phone:	Email:
Name	of Contactor (if a	applicable): _		Phone:
for cl deck	hange in exterior	paint colo	r, attach a color sample	lrawn to scale. Include paint or stain color samples. If request is and # of paint or stain color. Absolutely NO paint or stain on nange, attach a sketch or picture, architecturals, with full details
intent Na	and do not cor	nstitute ap		required. Their signatures below indicate an awareness of Include an additional sheet if necessary. Signature:
				Signature:
				Signature:
	ddress:			-

OWNER'S ACKNOWLEDGEMENT: I/We understand that:

1. Material herein contained shall represent alterations which comply with the zoning and building codes of Prince William County to which the above property is subject. Further, nothing herein contained shall be construed as a waiver or modification of such ordinances. All approvals are for conformity with existing architectural conditions within the community only. Neither the committee nor any agent thereof is responsible in any way for defects in any work. Applicant has sole responsibility for obtaining the necessary building permits, engineering, or other professional or technical advice, prior to commencement of construction. Further, each applicant shall be solely responsible for any damage to adjoining properties or persons that may result from the approval herein requested.

	No work shall commence until written approval from the ARB has been received by the owner. Any construction or exterior alteration before the approval of this application is not allowed and that, if alterations are made, I/we may be required to return the property to its former condition at my/our own expense; and that I/we may be required to pay all legal expenses incurred. Approval is contingent upon all work being completed in a timely and workmanlike manner and within 45 days. The estimated star								
Ο.	date is and the completion date is If unable to meet these dates I will notify the								
4	Association of the change Members of the ARB Boa		ent Agent may make routine inspections						
	Members of the ARB, Board of Trustees, or the Management Agent may make routine inspections. This request is subject to restrictions by the Declaration and a review process as established by the Board of Trustees. Any variation								
	from the original application must be resubmitted for approval. A copy of this request will be returned to me/us after review by the ARB.								
6.		ledge and agree that I/we will be solely liable for any claims, including without limitation, claims for property damage or							
	personal injury, which resu	which result from the requested addition or modification. I/we accept responsibility for maintenance, repair and upkeep							
	of said addition or modification.								
Inf	ormation Regarding You	r Exterior Modification							
	Prince William County Zon		view - (703) 792-4040, and Permit divisions - ((703)792-6924 may require					
2	that I file plans.	Doord has forth five (45) dove in	which to review and return their decision. Even	offert will be made to reply					
۷.	The Architectural Review Board has forty-five (45) days in which to review and return their decision. Every effort will be made to reply in a timely manner. Should the Architectural Review Board fail to approve, modify or disapprove this request within forty-five (45) days								
		r whatever reason the owner applicant is still obligated to follow and abide by the Governing Documents to include the Architectural							
		y in effect. This delay or oversight in no way permits the owner to make any exterior modification to their home or							
	-	at they know or should know would be a violation. The owner will still be held accountable and all remedies available to the							
3.		nable correction of the modification may still be used. architectural change forms may be directed to Key Advantage Community Management at (703) 680-2564.							
		nmon areas disturbed by construction activities shall be immediately returned to their original state.							
		ucks and Construction vehicles shall not leave the paved surface of the roadways.							
		ty at 1-800-552-7001, before any							
1.	i/we will contact the ARE	omanagement and have all wo	ork performed inspected to ensure complian	ce.					
	Signature of Owner	Date	Signature of Co-Owner (if applicable)	Date					
		Action by Arch	itectural Review Board						
D	ate Received: / /								
	Approved as requested								
	Or Approved subject to the								
	following conditions or								
	modifications								
		O'man atrium.	Deter						
	<u> </u>	Signature:	Date:						
	Disapproved – Reason for disapproval								
	ioi disappiovai								
		Signature:	Date:						
Final Inspection: / /		Signature:							
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