

Date Office Received: _____

**INCOMPLETE APPLICATIONS WILL BE DENIED AND RETURNED
FOR RE-SUBMISSION**

As the owner of the property being addressed, I understand and agree that:

1. No work, pursuant to this request, is to begin until after I have received written approval for it from the Architectural Control Committee and/or the Board of Directors.
2. Upon completion, contact the VPHOA office so that arrangements can be made for a follow-up inspection by the chairperson of the Architectural Committee to verify compliance with these plans.
3. Guidelines outlined in Architectural Rules and Guidelines shall be followed.
4. All approvals for architectural modifications expire after one year from date of approval.

Signature: _____
Owner/agent (authorization for Agent must be attached)

Property Address: _____ Lot # _____
(Street) (City) (Zip)

(Homeowner/Property Manager) Name: _____

Home Phone: _____ Business Phone: _____

Please include the following information with your request for any type of additions or changes (Examples: patio covers, carport roof/conversions, skylights, or other architectural modifications.)

1. Plot Plan to show your requested changes with complete dimensions of proposed improvement(s)
2. Plot Plan showing location and dimensions of residence in relation to property boundaries.
(All drawings must show affected elevations.)
3. Description of material to be used and color scheme desired.
