

VPHOA	Request to Replace House and/or Carport/Garage Roof
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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: _____

Check Applicable Boxes: House Roof Carport/Garage Roof

A sample or brochure (with the selected choice well marked) must be included with this request and provided to the Board for approval.

What is your current house color scheme (see list of current color schemes)?

Paint Color Scheme #: _____ Stucco color: _____

Wood Trim color: _____ Wood Siding Color: _____