SPRING MILLS SUBDIVISION UOA, INC ARCHITECTURAL CHANGE REQUEST APPLICATION

| Owner's Name: | | Property Address: | |
|--|---|---|--|
| Owner's Mailing Addr | ess (if different than above): | | |
| Phone Number: | | Email: | |
| the anticipated improv Photographs, drawings is mandatory. Attach a the managing agent may the information already | vement(s) such as: height, width, le pictures, brochures, etc. are helpfu separate sheet of paper if more space y perform a site visit during the review | for the Board of Directors/Committee to thoroughly understand ength, size, shape, and color (with paint sample if possible). l. <u>A copy of your PLAT with the location of your improvement</u> is needed. Representatives of the Association, the Board, and/or w of this application and may use digital photographs to argument e decision of the Board of Directors/Committee within forty-five | |
| Please check the box for | or the project that you are submitting | for: | |
| Fence | D Patio | Exterior Color Change | |
| Deck | Swing Set/Play Equipment | Driveway Alteration/Extension | |
| Other: | | | |
| Description of Project: | | | |
| | | | |
| Contractor's Name: | | Phone Number: | |

As evidenced by the signature below, I understand that approval does not relieve me of the responsibility for obtaining any and all necessary Building Permits, variances, and/or observing all local zoning ordinances. If approved by the Association, I agree to make the changes under the terms and conditions as specified in the approval letter and any accompanying documentation. All improvements must be on my property or property lines. If any portion of the Association property is disturbed or damaged by either my contractor, or myself then I agree to be responsible for and to restore the common elements to their original condition(s). The Declarant, The Board of Directors, and The Association are not responsible for the safety, construction, operation, maintenance, accidents, injuries, or other claims that may arise from the proposed change in the property.

| Signature of Applicant: | | Date: | |
|-------------------------|--|---|--|
| PLEASE RETURN TO: | Spring Mills Subdivision ATTN: Michelle Showers 115 N. Queen Street Martinsburg, WV 25401 Email: <u>mshowers@clagett.com</u> | FOR MANAGEMENT/BOD USE: Approved per the conditions on the attached letter Denied per the reasons stated in the attached letter | |