

List Proposed Changes: _____ RETURN ALL COPIES TO CR Regent HOA.

Centre Ridge Regent Exterior Alteration Application

Centre Ridge Regent HOA 14275 Uniform Drive Centreville, VA 20121
(703)968-7505

Instructions to Applicant:

- Complete all blanks. *Incomplete applications will be returned for completion.*
- Please consult the Architectural Guidelines for specific required details for each change.
- Provide required details on attached sheets (sketches, scale drawings, photos, catalog illustrations, architectural plans, etc.)
- For all paint color changes, a sample of the color must be submitted with the application.
- A copy of the plat given to you by your builder is required for all alterations except paint changes and storm doors/windows. *Indicate on the plat the location of the proposed structure.*

From: (Please Print or Type)

Name: _____ Section: _____ Lot: _____

Address : _____ Work Phone: _____

City,State,Zip: _____ Home Phone: _____

Start Date: _____ Completion Date: _____ Proposed Alteration: ___ Existing Alteration: ___

DESCRIBE CHANGES DESIRED: (Color, style, location, size, material used, etc.) *“See attached” is not sufficient description. Plans or description must include accurate dimensions/measurements, material used, location and all other details requested in the Architectural Guidelines.*

(EXAMPLE: 12 X 12 pressure treated pine deck w/standard railings added to rear of home. See plans attached.)

(Additional Information Needed - Decks and Fences)

For Decks and Patios: The construction of my deck/patio will not adversely impact the drainage to/of other properties.

Homeowner's initials: _____

For Fences: 1. The wood used for fences and gates must be left to weather naturally.

Only a clear, colorless preservative may be applied. Homeowner's Initials: _____

_____ 2. The finished fence will not extend forward from rear corner of house. Homeowner's Initials: _____

Four (4) Signatures of adjacent or impacted *property owners*. Signatures indicate an awareness of the applicant's intent. (Only one signature per home.)

FOUR SIGNATURES ARE REQUIRED FOR A COMPLETE APPLICATION

Name : _____ Lot : _____ Name : _____ Lot : _____

Address : _____ Sec : _____ Address : _____ Sec : _____

Name : _____ Lot : _____ Name : _____ Lot : _____

Address : _____ Sec : _____ Address : _____ Sec : _____

By signing this form I am stating that I have read and followed the ARB Guidelines and the seven (7) listed statements on the reverse side of this form.

Owners's Signature(s): _____ Date: _____

Application Date Received: _____ Received By: _____

ARB Committee Use Only

Architectural Review Board Action Date: _____ ARB Chair/Member _____

_____ Approved Proposed Changes

_____ Disapproved Proposed Changes
Reason for Disapproval: _____

_____ Approved Proposed Changes

_____ Disapproved Proposed Changes
Reason for Disapproval: _____

NOTE: Reverse side contains additional information for completing your application.

NOTE: If you disagree with the decision, an appeal procedure is set forth in the Declaration of Covenants, Conditions and Restrictions. A written request must be received by the ARB for the first appeal within 10 days of receipt of the written ARB decision. *The ARB has 10 days to review, therefore, final ARB approval for appeals will take 20 days.* If you have any questions or concerns about this application, contact the Homeowners Association office at 968-7505.

Please read and sign the front of this form acknowledging that you have read and understand the below statements:

1. I understand that compliance with Centre Ridge Regent Architectural Guidelines and approval by the Architectural Review Board does not necessarily constitute compliance with the provisions or building and zoning codes of Fairfax County (the building ordinance of the Fairfax County Building Department requires that you file plans with the building inspector at 352-0762 for construction requiring a building permit). Further, nothing herein contained shall be construed as a waiver or modification of any said restriction.
2. I understand and agree that no construction or exterior alteration shall commence until written approval of the Architectural Review Board has been received by me, and that if alterations are made, I may be required to return the property to its former condition at my own expense if this application is disapproved wholly or in part, and that I may be required to pay all legal expenses incurred.
3. I understand that the members of the Architectural Review Board are permitted to enter on to my property at a reasonable time for the purpose of inspecting the proposed project, the project in progress, and the completed project, and that such entry does not constitute a trespass.
4. I understand that any approval is contingent upon construction or alterations being completed in a workman-like manner.
5. This application will usually take no longer than 30 working days when a conforming application has been submitted ARB decision is required on all applications within 45 days of receipt of a complete application.
6. I understand that the alteration authority granted by this application will be revoked automatically if the alteration requested has not commenced within 180 days of the approval date of this application and completed by the date specified by the Architectural Review Board.
7. I understand that I may not rely upon a verbal approval by the Architectural Review Board, one of its member, or management. Architectural Review Board approvals are communicated *in writing only*.

The Board of Trustees and the Architectural Board wishes to thank you for your cooperation in reviewing and following your homeowner documents and ARB Guidelines.

Checklist of items needed to complete your application:

The checklist is designed to aid you in providing a complete application.

- ___ Plat (IE. Indicate on the site plan the location of your proposed structure)
- ___ Detailed drawings or plans (sketches, scale drawings, photos, catalog illustrations, architectural plans)
Note: Must have drawings of fence and gate.
- ___ Elevation of deck. (Please enclose height from deck to the ground.)
- ___ Railing height.
- ___ Railing design detail, and number of starburst.
- ___ Description of materials.
- ___ Estimated start and completion dates (Actual dates must be given-M/D/Y.)
- ___ Your signature.
- ___ Paint Sample (if applicable)
- ___ Initial the statements referring to compliance with decks and fences.
- ___ Deck Storage Statement
- ___ Storm Door (color of door, color of house door/house trim, picture of door REQUIRED).
- ___ Four signatures of neighbors who have a view of the change.

Note: *Incomplete applications will be disapproved.*

Please Mail or Deliver your ARB application to the above address no later than the 2nd Tuesday of the month.