

Application for Exterior Alteration (Architectural Request)

PLEASE PRINT LEGIBLY

Association:	
Subject Property:	
All Homeowner Name(s):	
Homeowner Primary Mailing Address:	
Primary Phone Number:	Secondary Phone Number:
Primary Email Address:	Secondary Email Address:
Describe proposed alteration, attach additional sheets if necessary:	
Contractor's Name, if applicable:	

All Homeowners listed on the Deed must initial and sign this form where indicated.

____ / ____ If applicable, you must submit items 1 through 5 for this application to be processed. If these items are applicable and not submitted, this application will be denied:

1. Total dimensions of proposed project, if applicable, include square footage;
2. Complete list and description of materials to be used, including manufacturer, color, and model;
3. If applicable, plat showing property boundaries with the area of the proposed alteration drawn on it;
4. If applicable, diagram, elevation, and/or illustration of the proposed project, (a working web-link may be used);
5. If a contractor is completing work, copy of contractor's work license **and** certificate of insurance.

____ / ____ The Homeowner(s) hereby agree that any and all liability caused by, or arising from, this modification shall be assumed by the Homeowner(s). Homeowner(s) agree to release the Association, HPS Management, Builder, and Declarant of any and all liability.

____ / ____ Approval by the Association is for the outward appearance only and does not imply any engineering review of a structural nature has been completed. No structure may be permanently installed in any drainage or utility easements. Any construction pursuant to the provisions of this approval shall be subject to the continuing effect of the provisions of the Declaration, Bylaws, Rules and Regulations of the Association, the Architectural Review Committee, the Board of Directors, and/or their designee.

____ / ____ This application will be forwarded for review to the Board of Directors and/or the Architectural Review Committee. It is the Homeowner's responsibility to obtain any government issued permits that may be required for the proposed alteration. If the requested alteration requires any ground to be dug up, it is the Homeowner's responsibility to have any underground utilities identified to prevent damages from occurring.

____ / ____ Depending on the scope of your project, please allow at least 30 calendar days for the Board of Directors and/or the Architectural Review Committee to meet and review this application. **The community manager and management company do NOT make any decision or recommendation regarding this application.** Status updates and questions may be emailed to Admin@InfoHOA.com. Please allow two full business days for the manager to respond.

Homeowner's Signature: _____ **Print Name:** _____ **Date:** _____

Homeowner's Signature: _____ **Print Name:** _____ **Date:** _____

Ways to submit this form: Email: Admin@InfoHOA.com
Fax: 866-724-5497
Mail: Document Processing, PO Box 1056, Havre de Grace, MD 21078
Portal: Go to www.InfoHOA.com

**ANNAPOLIS PRESERVE COMMUNITY ASSOCIATION
ARCHITECTURAL CONTROL COMMITTEE
NEIGHBOR ACKNOWLEDGEMENT RECORD**
(Each Neighbor to Complete a Separate Record)

Applicant Name(s): _____

Address: _____

Telephone Number(s): _____

(Home)

(Work)

This application is for (check all that apply): Deck__ Patio__ Wall__ Porch__

Major Landscaping__ Walkways__ Other (please explain)_____

This form serves to notify the adjacent property owner(s) that you desire to make the above named improvement on your property, as required by the Architectural Control Committee. Please have your neighbor acknowledge that they have been notified by signing below. **Each neighbor is requested to submit this form directly to the property management agent for Annapolis Preserve Community Association. Also, notify the Chairperson of the Architectural Control Committee that you submitted this form; their contact information is found in the Annapolis Preserve Community Directory.**

Address of Adjacent Property: _____

Adjacent Property Owner Name(s): _____

Print Name(s)

Telephone Number(s): _____

(Home)

(Work)

Acknowledgement: _____

Signature

(Date)

Acknowledgement: _____

Signature

(Date)

Neighbor Comments: _____

**ANNAPOLIS PRESERVE COMMUNITY ASSOCIATION
ARCHITECTURAL CONTROL COMMITTEE
CHANGE APPLICATION**

Name: _____

Address: _____

Telephone Number(s): _____
(Home) (Work)

This application is for (check all that apply): Deck__ Patio__ Wall__ Porch__

Major Landscaping__ Walkways__ Other (please explain)_____

Expected project start date: _____

Expected project end date: _____

Dimensions (Length, width, and height): _____

Color Scheme(s): _____

Material(s) to be used (e.g., Type of wood and stone): _____

Have you informed your immediate neighbors (check one)? Yes__ No__

(As a courtesy, it is required that your neighbors be advised of your application and **each neighbor sign and submit to the property management agent for Annapolis Preserve a separate Neighbor Acknowledgement Record.**)

Will this affect grading/drainage: No_____ Yes (please explain how)_____

Have you secured permission/permit (s) from the county? Yes__ No__

How does this lay out along your lot lines?_____

Along with this application, you must submit sketches of what your finished project will look like in detail and a drawing of how it will lay out on your lot relative to property lines and house. If your final project is different from the initial drawing approved by the Architectural Control Committee, you will need to reapply with updated information and drawings. **Please submit this form and all other required information to the property management agent for the Annapolis Preserve Community Association (APCA). Also, notify the Chairperson of the APCA Architectural Control Committee that you submitted this form; their contact information is found in the Annapolis Preserve Community Directory. Please provide your neighbors with the acknowledge forms for them to submit directly to the Annapolis Preserve property management agent.**