

**Connemara Woods Homeowners Association
Architectural Change Request Form**

Name: _____ Property Address: _____

Home Phone: _____ Daytime Phone: _____ Email Address: _____

Estimated Start Date: _____ Proposed Completion Date: _____

Description of Proposed Alteration, Change, or Replacement:

General Description: _____

Proposed Materials:

Color: _____ Style: _____ Type: _____ Dimensions: _____

Location: (provide drawing or detailed description as applicable)

Additional Information: (list or attach any other relevant information)

Certification:

I understand approval of the above changes by the Connemara Woods Homeowners Association Architectural Change Committee or Board of Directors does not relieve me of the responsibility for obtaining any and all necessary Building Permits, Variances, and observing all local zoning ordinances. If approved, I agree to make the changes under the terms and conditions specified in the letter of approval. All changes will be on my property or property lines. If any portion of the Association's property is disturbed or damaged by my contractor, agent, or myself, I agree to restore the Association's property to its original condition at my expense.

Applicant Signature: _____ Date: _____

Mail completed form to:

Connemara Woods Homeowners Association

Attn: ACC Chair

P.O. Box 1544

Sterling, VA 20167

Email questions to: ACCchair@connemarawoods.org