

HILL CREST TRAILS HOMEOWNERS ASSOCIATION
APPLICATION FOR ARCHITECTURAL CHANGE

Applicant Name(s): _____ Phone: _____

Property Address: _____

I. DIRECTIONS: (Please print or type)

Please use area below to briefly describe all proposed improvements, alterations or changes to your lot or home. Attach all required details by sketches, drawings, clippings, pictures, catalog illustrations, and other data. Show location of item on your property on a copy of the survey. Include details of color(s), measurements, materials, and any other pertinent information.

Must submit two (2) complete copies of application and all attachments. A SEPARATE FORM MUST BE USED FOR EACH PROPOSED CHANGE.

II. OWNER'S ACKNOWLEDGEMENTS

- A. I understand...that nothing herein shall be construed to represent those alterations to land or buildings in accordance with these plans shall not violate any of the provisions or building and zoning codes of the county to which the above property is subject. Further, nothing herein contained shall be construed as a waiver or modification of any said restriction.
- B. ...that no work on this request shall commence until written approval of the Architectural Control Committee has been received by me.
- C. ...that any construction or exterior alteration undertaken by me or in my behalf before approval of this application is not allowed; 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; and, that I may be required to pay all legal expenses incurred AND that any approval is contingent upon construction or alterations being completed in a proper manner.
- D. ...that members of the Architectural Control Committee are permitted to make a routine inspection.

- E. ...that the Architectural Control Committee will return a copy of this application to me after review.
- F. ...that there are architectural requirements covered by the Covenants and a review board process as established by the Board of Directors.
- G. ...that the alteration authority granted by this application will be revoked automatically if the alterations requested have not commenced within 180 days of the approved date of this application and/or completed by the date specified by the panel.
- H. that all proposed improvements must meet county codes. My signature indicates that these standards are met to the best of my knowledge. I understand that application for a county building permit is my responsibility.
- I. ...that any variation from the original application must be resubmitted for approval.

OWNER/APPLICANT SIGNATURE: _____ DATE: _____

CO-OWNER/APPLICANT SIGNATURE: _____ DATE: _____

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|--------------------------|
| FOR COMMITTEE USE ONLY: |
| DATE RECEIVED: |
| APPROVED (Signature): |
| DISAPPROVED (Signature): |
| COMMENTS: |

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| Mail To: Hill Crest Trails Homeowners Association |
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**** NO OTHER FORM WILL BE ACCEPTED ****