



ARCHITECTURAL CHANGE APPLICATION

Owner's Last Name, First Name

Owner's Address

() - () -

Home Phone

Work/Cell Phone

E-Mail

Complete the following if work is to be done by a third party:

Business Name

Business Contact

() -

Work Phone

I. DESCRIPTION OF IMPROVEMENT

Describe in detail the improvement (also, known as an addition, alteration or change) that you propose in accordance with the Milestone Architectural Standards, the Declarations, and the Rules and Regulations. Use additional pages if necessary and illustrate on a copy of your plat map the location of your improvement, if applicable. NOTE: CERTAIN TYPES OF IMPROVEMENTS REQUIRE A COUNTY BUILDING PERMIT. THE ASSOCIATION TAKES NO RESPONSIBILITY FOR OBTAINING THAT PERMIT. Call the County Building Inspector if you have questions.

The improvement/improvements that I propose to make is/are:

FOR ARC USE

Date of Receipt ____ / ____ / ____

APPROVED:

() As Submitted

() With provisions on page 2

DENIED: See page 2 ()

Board Member Approvals (2 needed)

____ / ____ / ____ Approved/Denied Date

_____ Total Pages (including plat, photos & Standard requirements.)

See www.milestone.com under the Architectural tab for standard requirements.

Return completed application, plat and any other related requirements stated in Standards to the Milestone office during office hours or to the clubhouse drop box after hours. You may also send a clear copy by email to manager@milestonecommunity.com. If you have any questions, please call or email the Milestone office at (804)550-4656.

II. ACKNOWLEDGEMENT OF ADJACENT OWNERS

Show and explain your completed application to the adjacent residents who would be most affected by the proposed project; two signatures are required in the next section.

NOTE: If the project requires contractor(s) to access a neighbor’s property to complete the modification, such as driving through their yard, the neighbor must agree to the access.

III. ADJACENT OWNERS

Your signature shows that you are aware of this application. **It does not mean that you approve of the project.** If you do not approve or wish to discuss the proposal, call or email the On-Site Manager. Please sign legibly.

Name

Name

Address

Address

() - () -
Home Phone Work/Cell Phone

() - () -
Home Phone Work/Cell Phone

Signature

Signature

Date: / /

Date: / /

IV. OWNER'S AGREEMENT

I have completed this application in good faith and it accurately represents the improvement that I propose to make. I understand that approval of this application does not authorize me to violate any provisions of the Architectural Standards, Declarations, Rules and Regulations, county or state building, zoning, easement, and/or right of way requirements or codes.

I understand and agree that any changes undertaken prior to receipt of approval from the Board of Directors is at my own risk and that I may be required to return the property to its former condition at my own expense should the application not be approved wholly or in part and I may be subject to fines.

I understand that representatives of the Board and/or the Architectural Review Board are permitted to enter upon my property at any reasonable time for the purpose of inspecting the area for the proposed project, the project in progress, or the completed project and that such entry does not constitute trespass.

I understand that work must be completed in a workmanlike manner within 180 days after the Board’s approval and that the improvement (also, known as an addition, alteration or change) must be located only on my property. I also understand that the maintenance, repair, and/or replacement of the improvement that is requested are my responsibility and that of all future owners of this property.

Owner: _____ **Date:** / /

V. REVIEW BY THE BOARD OF DIRECTORS

The Board will process this application without undue delay, although it has up to 30 days for review. The procurement of additional required information may extend the processing time and in no way may be construed to be a waiver of authority by the Board. The architectural review process is described in the governing documents and the Rules and Regulations. If you wish to discuss this application, contact the On-Site Manager. If you disagree with the decision of the Board, a written appeal may be made within 10 days of receipt of its decision.

----- **FOR ARCHITECTURAL REVIEW BOARD USE** -----
Please describe in detail if an application is approved with provisions or not approved.

