## CONSTRUCTION MODIFICATION REQUEST FORM

NAME OF HOMEOWNERS:				
LOT NUMBER:  PHYSICAL ADDRESS (No Post Office Boxes, please):				
PROPOSED CONSTRUCTION START:				
PROPOSED CONSTRUCTION FINISH CONTRACTOR'S NAME:				
MODIFICATION DESCRIPTION:				

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## SKETCH OF PROPOSED CONSTRUCTION MODIFICATIONS

(Provide accurate dimensions and attach additional pages as necessary)

## HOMEOWNER'S ACKNOWLEDGMENT: I/we understand that:

Proposed modification(s) must fully comply with the City of Fairview Zoning and Building Codes; also applicable State and National Codes. The (ARB) Architectural Review Board has no authority to waive any County, State, or National Code. I am/we are responsible for obtaining all necessary permits prior to construction.

Construction modification work *may not* commence until I/we have received written approval from the ARB that may take up to twenty-five (25) days from the day the application was received by the HOA. My/our non-compliance with this provision may require me/us to return our property to its former condition at my/our own expense, including all legal fees acquired by the HOA to enforce this action.

Approval of my/our application is contingent upon all work being completed in a professional and workmanlike manner, meeting industry standards for the modification/construction intended, and in full compliance with the ARB-approved construction modification request. Executed construction modification(s) that are not in compliance with the ARB-approved request will be removed or repaired at my/our own risk and expense, including any legal fees acquired by the HOA to enforce this action.

The technical liability for the executed modification(s) rests solely with me/us and/or my/our own technical representative(s).

I/we hereby acknowledge that I/we will be solely liable for any and all claims including, without limitation, claim for property damage or personal injury that will result from the requested construction modification(s). I/we hereby indemnify The Windstorm Park Homeowners Association, Inc., the Board, and the ARB, from and against any and all such claims. Moreover, I/we accept all responsibility for care, maintenance, repair, and upkeep of said construction modification(s).

Signature of Owner & Date
Date Received by HOA

## ARCHITECTURAL REVIEW BOARD DECISION FORM

Property Owner(s):		
Modification Review:	[1] [2] [3] [Appeal]	Date:
Violation Review:	[1] [2] [3] [Appeal]	Date:
Property Address:		
Element(s) Reviewed:		
Modification Review		
[ ] Approved as subm	nitted by homeowner	[ ] Denied
[ ] Approved as subm	nitted by homeowner su	bject to the following conditions:
Violation Review		

Member, ARB/Date

Member, ARB/Date

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