ARCHITECTURAL CHANGE APPLICATION

PLEASE PRINT IN INK

NAME _____

ADDRESS _____

PHONE _____

E-MAIL _____

COMMUNITY _____

WOODS LANDING

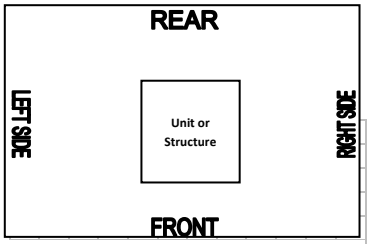
Return to:

Bay West Management
P.O. Box 786
Crownsville, MD 21032

REC'D (BAY WEST) _____

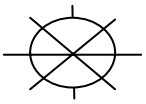
FWD TO: _____

REC'D (EPCOM) _____



SAMPLE

DESCRIBE BELOW WITH ILLUSTRATIONS TO INCLUDE PROPERTY LINE, DIMENSIONS, NATURE, KIND, SHAPE, COLOR, MATERIALS, LOCATION, DRAWINGS, AND BROCHURES AS APPLICABLE. ATTACH ADDITIONAL SHEETS AS NECESSARY.



Indicate direction of North

THIS APPLICATION IS NOT VALID AND WILL NOT AUTHORIZE ANY CONSTRUCTION OR BUILDING MODIFICATIONS UNTIL THE APPLICATION IS RECEIVED FOR CONSIDERATION BY THE ENVIRONMENTAL PRESERVATION COMMITTEE (EPCOM) OF THE WOODS LANDING COMMUNITY ASSOCIATION AND THE PROPOSED CHANGES AND/ OR CONSTRUCTION ARE APPROVED, IN WRITING, BY THE ASSOCIATION. APPROVAL BY EPCOM DOES NOT ABSOLVE THE OWNER FROM SEEKING AND COMPLYING WITH ALL APPLICABLE CODES, RULES, AND REGULATIONS OF THE LOCAL JURISDICTION HAVING AUTHORITY.

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IN APPLYING FOR THE ABOVE ARCHITECTURAL CHANGE, I AGREE TO FOLLOW THE CHANGES AS DESCRIBED HEREIN. FURTHERMORE, I AGREE THAT COMPLIANCE WITH THE LAWS, REGULATIONS, AND CODES OF THE COUNTY, STATE, OR OTHER APPLICABLE AUTHORITY HAVING JURISDICTION, IS MY SOLE RESPONSIBILITY AS A HOMEOWNER AND NOT THE RESPONSIBILITY OF THE WOODS LANDING COMMUNITY SERVICES ASSOCIATION, INC. (WLCSA), ITS BOARD, ITS EPCOM, AND ITS AGENTS. I FURTHER RELEASE, INDEMNIFY AND HOLD HARMLESS THE WLCSA, ITS BOARD, ITS EPCOM, AND ITS AGENTS FROM ANY FAILURE BY ME/WE TO DO SO.

_____

OWNER'S SIGNATURE DATE

PLEASE BE ADVISED OF THE FOLLOWING ACTION WHICH HAS BEEN TAKEN ON THIS APPLICATION FOR ARCHITECTURAL CHANGE.

☐ APPROVED ☐ APPROVED AS MODIFIED BELOW ☐ NOT APPROVED FOR REASONS BELOW

Copies: EPCOM, Bay West Mgt, Owner

_____

CHAIRPERSON, EPCOM DATE