

**TOWNHOMES AT SMALL'S NURSERY
COMMUNITY ASSOCIATION
C/O Chambers Management, Inc.
12051-B Tech Road, Silver Spring, MD 20904
301-680-0700 301-625-0438 fax**

ARCHITECTURAL CHANGE APPLICATION

- **TYPE or PRINT - Please READ INSTRUCTIONS and COMPLETE ALL SPACES. USE A SEPARATE APPLICATION FOR EACH REQUEST.**
- **County laws require you to obtain a Building Permit on most structural changes to your home and some on your lot. This may include fences, decks, patios, sheds, etc. You are responsible for contacting the County to determine if a permit is required. Approval or denial of a request is based on the Homeowners Association criteria. Property owner has sole responsibility for compliance with County codes and regulations.**
- **Owner must contact "Miss Utility" at (800) 257-7777 prior to digging.**
- **ATTACH detailed, scaled drawing, plat map or blueprint of the lot, with proposed alterations indicated IN RED (A copy of your lot location drawing received at settlement is ideal). Include all lot and alteration dimensions, color changes, materials, and design information.**
- **Any variation from the original application must be resubmitted for approval.**
- **ATTACH structural drawings, including elevation measurements, the color and material list and photo if available, or proposed alteration.**
- **INCOMPLETE APPLICATIONS OR APPLICATIONS SUBMITTED WITHOUT PLANS, ETC., WILL BE RETURNED.**
- **Use the reverse side of Application if more space is needed.**
- **SUBMISSION OF APPLICATIONS DOES NOT GIVE AUTHORIZATION TO BEGIN WORK.**
- **WRITTEN APPROVAL MUST BE OBTAINED PRIOR TO COMMENCING ALTERATIONS.**

Name: _____ Date Submitted: _____

Address: _____ Work Telephone: _____

_____ Home Telephone: _____

Signature 1st Owner: _____ E-mail Address: _____

Signature 2nd Owner _____ Date Work to Begin: _____

Lot #: _____ Block: _____ Date Work to be Completed: _____

A. Proposed Alteration: _____

B. Types of Materials: _____

C. Dimensions: _____

D. Colors: _____ House _____ Trim _____ Door _____ Other _____ Stain

E. Additional Details: _____

Signature and comments from adjoining property owners who are affected by the proposed alteration are required. Their signatures indicate an awareness of your intent and do not constitute approval or disapproval. Signers are encouraged to write to the Association if they have additional comments.

Address	Signature	Comment, if any
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--- FOR HOA USE ONLY ---

Date Received: _____ Date Action Taken: _____ Reviewed By: _____

Approved **Approved with Exceptions** **Denied Incomplete/Pending**

Comments: _____
