

**FAIR WOODS HOA
ARCHITECTURAL IMPROVEMENT REQUEST FORM**

Incomplete applications or those missing supplemental information will be returned

WORK MAY NOT COMMENCE UNTIL APPROVAL IS RECEIVED IN WRITING.

To: Fair Woods HOA - Architectural Review Board
C/o Rosewood Management & Consulting Services
3900 Jermantown Rd., Ste. 470
Fairfax, VA 22030
703-778-4480 / fax 703-536-8105
Email: arcdept@rosewoodmcs.com

Name of Applicant: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone (H) _____ (W) _____

Email Address: _____

Proposed Improvement:

Record of notification provided to two affected neighbors: (REQUIRED INFORMATION)

1. Name: _____ Address: _____ Signature: _____

2. Name: _____ Address: _____
Signature: _____

Applicant must complete the following and submit in duplicate with application:

1. Site plan showing size, shape and location of improvement to residence and to adjoining properties (including specific dimensions of improvement and distances to adjoining properties).
2. Manufacturer's brochure, if available.
3. Color samples, if applicable.
4. Architectural plans/drawings (for major additions/improvements).
5. Grading plan, if applicable.
6. Detailed written description of improvement (If not provided application will be returned pending additional information).

Applicant hereby warrants that Applicant shall assume full responsibility for:

1. All costs related to the improvement including supplies, contractor fees, cleanup, hauling, waste disposal etc.
2. All landscaping, grading, and/or drainage issues relating to the improvements.
3. Obtaining all required county approvals related to said improvements.
4. Complying with all applicable county ordinances.
5. Any damage to adjoining property (including common area) or injury to third persons associated with the improvements.

Applicant hereby states that they have read the ARC guidelines and agree that all work performed will be in compliance with those guidelines.

Signature of Applicant

Date

ARCHITECTURAL REVIEW COMMITTEE RESPONSE

Date Application Received _____

_____ Request approved as submitted.

_____ Request approved subject to: _____

_____ Response suspended pending submission of: _____

_____ Request disapproved because: _____

Signature - ARC Member

Date

Signature - ARC Member

Date