

Application for Exterior Alteration

Cypress Farm Owners' Association Inc
5849 Harbour View Blvd Suite 200
Suffolk, VA 23435
Office # (757) 484-0706
Fax # (757) 484-3217

Date: _____

Name of Property Owner: _____

Property Address: _____

Phone number of Owner: _____

Contractor Name: _____

Contractor Address: _____

Date of Anticipated Construction Start & Finish: _____

Ladies and Gentlemen:

We are requesting approval of the following described alteration(s) in accordance with the Architectural Guidelines.
Enclosed are the appropriate documents as indicated below:

Brief description of alterations:

Please indicate with an "X" in the space provided each of the following items you've submitted:

_____ Plans and specifications, including type of materials to be used

_____ Construction schedule

_____ Physical survey showing the exact location of the alteration or addition in relation to the existing structure(s) (also know as a Site Plan)

_____ Elevation plan of excavation or change in grading

_____ Photograph(s)

_____ Illustration of any new replacement components such as windows, doors, etc.

_____ Description of and changes in exterior lighting

_____ Description of plantings or landscape to be removed, added, or altered

_____ Other (please give brief description) _____

I understand that I shall wait for receipt of written approval of this application before beginning the foregoing alteration(s), and that approval of such alteration(s) by the Architectural Review Board/Board of Directors does not release us of our obligations to ensure that such alteration(s) is in compliance with the applicable Building and Zoning ordinances for the City of Suffolk, and the guidelines and restrictions established by the Cypress Farm Owners' Association. Please note that any damage caused to sidewalks, curbs, and streets due to the installation and/or construction of alterations will be my (the homeowners) responsibility to repair and/or replace, at my own cost and must be returned to its original condition.

ALL EXTERIOR ALTERATIONS MUST BE COMPLETED WITHIN NINETY (90) DAYS FROM THE DATE OF THE APPROVAL LETTER.

Sincerely,

Signature of Applicant

Date

PLEASE PRINT:

Name: _____

Phone: (H) _____

(W) _____

Address: _____

(C) _____

(Fax) _____

ARCHITECTURAL REVIEW COMMITTEE / BOARD OF DIRECTORS

_____ Approved as submitted.

_____ Approved with attached stipulations

_____ Denied*

By:

_____ Signature _____ Date _____
Print Name/Title

_____ Signature _____ Date _____
Print Name/Title

_____ Signature _____ Date _____
Print Name/Title

_____ Signature _____ Date _____
Print Name/Title

_____ Signature _____ Date _____
Print Name/Title

***COMMENTS:**