

**GLENWOOD SEASONS HOMEOWNERS ASSOCIATION**

525 S. Independence Boulevard  
Suite 200  
Virginia Beach VA 23452-1103  
(757) 497-5752  
FAX (757) 497-9133

**APPLICATION FOR ARCHITECTURAL REVIEW**

Date: \_\_\_\_\_

Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: H: \_\_\_\_\_ W: \_\_\_\_\_

In accordance with the Declaration of Covenants and Restriction, I/We are requesting approval for the following described alteration/change/addition, and have enclosed the documents designated below:

Description of alteration/change/addition:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ Plans and Specifications including type of materials to be used.

\_\_\_\_ Survey, Site Plan or Plot Plan showing location of addition or alteration on lot/in relation to existing structures.

\_\_\_\_ Illustration of any new or replacement components such as windows, doors, lighting, gutters etc.

\_\_\_\_ Description of plantings/trees to be removed or added.

\_\_\_\_ Copy of city Building and Zoning Permits.

\_\_\_\_ Photograph/Drawings

\_\_\_\_ Other (please describe)

I/we understand that I/we must wait for written approval before beginning the subject alteration and that approval by the Architectural Committee does not release our obligation to ensure that the alteration is in compliance with the applicable regulations for the city.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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The request as described is approved.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The request as described is approved with the following conditions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The request as described is denied.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

The request as described is denied because of the following conditions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Architectural Committee Final Inspection Performed on \_\_\_\_\_ (Date)

Performed by \_\_\_\_\_ (Signature)