

# REQUEST FOR ARCHITECTURAL CHANGE APPROVAL

Send to:

Sommerville Owners Association Architectural Review Board, P.O. Box 9, Seaford, VA 23696

Owner's Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Property Address \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Type of change:  Deck  Patio  Shed  Sunroom  Fence  Colors  Other \_\_\_\_\_

Requested Start Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**ARB approval is required before any work begins.**

**Incomplete requests shall not be approved until all information is received.**

## Your request shall include:

1. This completed form with your signature.
2. A description of the change or addition.
3. A copy of your property plat showing:
  - The exact location of the proposed change or addition
  - The distance to your property lines from the proposed change
  - The dimensions of relevant surrounding features
4. A reasonably accurate rendering showing:
  - Style (manufacturer or product brochures are helpful)
  - Dimensions (your drawings or the contractor's drawings)
  - Description and sizes of materials
  - Colors
5. A request for changing exterior colors shall include a color samples.

## Important Considerations:

1. No work in this request shall begin until written approval is given by the ARB.
2. Construction must meet all zoning, building codes, and laws of the county. **The homeowner is solely responsible for obtaining required permits before work begins. The Association cannot, and does not, assume any responsibility or liability for work done that is noncompliant with such zoning and building codes and ordinances.** For information regarding these rules and codes, the homeowner should call York County Department of Building Codes at (757) 890-3522.
3. Where applicable, the homeowner is solely responsible for marking utility and communications easements. The homeowner is required to call *Miss Utility* at 1-800-552-7001.
4. The homeowner is responsible for keeping the construction site orderly and debris removed. **NOTE: Sommerville Covenants do NOT allow a contractor's sign in the front yard.**
5. Work shall be started within 30 days of ARB approval, or within 30 days of an alternative start date indicated and approved on this form. Work shall be completed within 60 days after it has begun, and shall be required to pass an ARB final visual inspection.
6. Misrepresentation of any items in this request, either written or oral, may void approval.

**I have read all the guidelines and confirm that my request meets the requirements and standards.**

Owner's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## Architectural Review Board (ARB) action:

Date request was received \_\_\_\_/\_\_\_\_/\_\_\_\_

- Approved as submitted
- Disapproved for the following reasons \_\_\_\_\_

ARB Chairman's Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_