

**MANOR WOOD ESTATES
ARCHITECTURAL APPROVAL FORM**

TO: Architectural Review Committee

DATE: _____

From: _____

Email: _____

Address: _____

Phone: _____

Request the following architectural change be authorized:

DESCRIPTION:

SPECIFICATIONS (specify all that apply)

Model: _____

Color: _____

Height: _____

Materials: _____

Drawing/Plan/Photo (attach if more space is necessary)

Applicant hereby warrants that Applicant shall assume full responsibility for:

- A. All landscaping, grading, and/or drainage issues relating to the improvements (including replacing bonds or escrows posted by the Developer currently in place affect the Lot);
- B. Obtaining all required Town or County ordinances relating to said improvement;
- C. Complying with all applicable Town or County ordinances;
- D. Any damage to adjoining property (including common area) or injury to third persons associated with the improvement.

Homeowner Signature: _____ **Date:** _____

TO: Homeowner

FROM: Architectural Review Board

Your request for architectural change is hereby Approved / Disapproved

If disapproved, for the following reason(s):

Questions: Call ARMI @ (540) 347-1901 or Fax: (540) 347-1900 or Email: HOA@ARMIVA.com.

Send form and documentation to: ARMI, PO Box 3413, Warrenton, VA 20188, or email or fax to our office at the contact information above.