

**KINGSBRIDGE HOMEOWNERS' ASSOCIATION  
ARCHITECTURAL APPROVAL FORM**

Association Name: \_\_\_\_\_

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

From: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

**Request the following architectural change be authorized:**

**DESCRIPTION:**

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**SPECIFICATIONS (specify all that apply)**

Model: \_\_\_\_\_

Color: \_\_\_\_\_

Height: \_\_\_\_\_

Materials: \_\_\_\_\_

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

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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.

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**TO:** Homeowner  
**FROM:** Architectural Review Board

Your request for architectural change is hereby Approved / Disapproved

If disapproved, for the following reason(s):

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