

# Chancellor Green Civic Association

## Application for Alterations or Modifications

### Instructions:

1. Please review the applicable provisions of the Declaration(s) of Covenants prior to completion of this form. Application guidelines are provided in the Association's disclosure packet. Incomplete applications will result in delay or possible denial of your request. **Applications are to be sent to: Board of Directors, 816 Kilarney Drive, Fredericksburg, VA 22407.**

2. Describe **in detail** your proposed structural change or exterior modifications with attached exhibits. Include a description and/or exhibits of materials and colors proposed to be used, and any other useful information. Exhibits can be sketches, pictures, drawings, blueprints, and/or catalog illustrations.

3. Attach a copy of your plat or site plan showing the location of the project on your property. Such an attachment is not necessary for certain items such as storm doors and exterior house color changes.

4. For all work that is to be done by a contractor, you must provide a copy of the contractor's business license, insurance information and full contact information along with this completed application.

**Name of Property Owner(s):** \_\_\_\_\_

**Physical Address of Property:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Alternate Phone Number:** \_\_\_\_\_

**Description of Proposed Modification or Alteration:** \_\_\_\_\_

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

**Color:** \_\_\_\_\_ **Materials:** \_\_\_\_\_

**Expected Project Start Date:** \_\_\_\_\_ **Expected Project Completion Date:** \_\_\_\_\_

### *Please read the following before signing this application:*

1. Nothing contained herein shall violate the Virginia Uniform Statewide Building Code and Zoning Ordinance adopted and enforced by Spotsylvania County, or any other restrictions, regulations or requirements that apply to the Applicant's property. Further, nothing contained herein shall be construed as a waiver or modification of any said restrictions, regulations or requirements.

2. I understand that the Spotsylvania County Code requires that I file plans with the Building Official in Spotsylvania, Virginia for construction requiring a Building Permit.

3. I understand that no construction or exterior alteration is allowed on my property prior to approval of this application. If construction is initiated or alterations are made prior to approval of this application, I may be required to return the property to its former condition at my own expense and pay all legal expenses incurred by the Association.

4. I agree to grant members of the Board of Directors permission to enter my property at any reasonable time for the purpose of inspecting the proposed project, the project in progress, and/or the completed project.

5. I understand that approval of this application is contingent upon construction or alterations being completed in a workmanlike manner and consistent with the information and documentation provided to the Board of Directors.

6. I understand that the Board of Directors is permitted 30 days to approve or disapprove the requested construction, alteration or modification from the date a completed application is submitted to the Board.

7. I am aware of the restrictive covenants and rules and regulations adopted and enforced by Chancellor Green Civic Association and the Board of Directors.

8. I understand that any approval granted by the Board of Directors will be automatically revoked if (a) the change and/or modification requested has not commenced within 180 days of the approval date, or (b) the change and/or modification is not completed by a date established by the Board of Directors. In either case, a new application must be submitted for review and consideration by the Board of Directors.

9. Please submit any questions or concerns regarding an approved or denied application **in writing** to the Board of Directors. Denied applications may be resubmitted.

10. Remember to contact Miss Utility at 1-800-552-7001 before you dig.

11. Spotsylvania County Building Department can be reached at (540) 507-7222.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

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For Board use only:

Board Ruling: \_\_\_\_Approved \_\_\_\_Approved with Conditions \_\_\_\_Disapproved

Additional Remarks: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Chairman or Board Member presiding over meeting: \_\_\_\_\_