



Birkdale Homeowners Association

Request for Architectural Approval (ARC)

When completed, please mail, fax or email application to:

ACS West, Attention Lee Ann King, 1904 Byrd Avenue, Suite 100, Richmond, 23230. Fax: (804)-282-9590 Email:leeann@acswest.org. Phone: (804)282-7451

Property Owner's Name _____

Property Address _____

Telephone numbers (Home) _____

(Cell) _____

(Work) _____

Email Address _____

Submittal Date ___/___/___

=====

Complete the following if work is to be done by third party:

Business Name _____

Business Contact _____

Business Phone (Office)_____ (Cell)_____

Business Email _____

I. **DESCRIPTION OF ALTERATION**

- a. Describe in detail on the lines provided below, the changes you propose in accordance with the Birkdale Architectural Standards and the Declaration. Use additional pages if necessary and illustrate on a copy of your plat map the location of your improvement, if applicable. NOTE: CERTAIN TYPES OF ALTERATIONS REQUIRE A COUNTY BUILDING PERMIT. THE ASSOCIATION TAKES NO RESPONSIBILITY FOR OBTAINING THAT PERMIT. Call the Chesterfield County Building Inspector if you have questions.



b. Description of Project

II. ACKNOWLEDGEMENT OF ADJACENT OWNERS IMPACTED BY PROPOSED ALTERATIONS

a. Your signature below shows you are aware of this application. It does not mean you approve the project. If you wish to discuss this proposal, contact the Architectural Review Committee or Community Group.

| | |
|-----------|-----------|
| Name | Name |
| Address | Address |
| Phone | Phone |
| Signature | Signature |
| Date | Date |

Adjacent Owner Comments:



III. OWNER’S UNDERSTANDING AND AGREEMENT:

I have completed this application in good faith and it accurately represents the alteration I propose to make. **I UNDERSTAND THIS APPLICATION FOR ANY EXTERIOR CHANGES TO MY PROPERTY CANNOT VIOLATE ANY PROVISIONS OF THE ARCHITECTURAL STANDARDS, MASTER DECLARATIONS OR OF CHESTERFIELD COUNTY BUILDING AND ZONING CODES.**

I agree any construction or alteration undertaken prior to receipt of the Architectural Review Committee’s approval is at my own risk. Should work proceed without ARC approval and found to be in non-compliance with the Architectural Standards, I may be required to in part or wholly return the property to its former condition at my own expense. I also understand non-compliance may also result in fines levied by the Association.

I permit representatives of the Architectural Review Committee to enter my property at any reasonable time for the purpose of evaluating the area for the proposed project, to inspect the work in progress, or the completed project and that such entry does not constitute trespass. The ARC will attempt to provide advance notice before any inspection of my project.

I understand work must be completed within **120 days** after the ARC’s initial approval. I also understand the changes I have described in my application are the basis for ARC review and preliminary approval. Final ARC approval is contingent upon inspection of the completed project consistent with the description I provided in my application. **I understand I am required to notify the ARC after the project is completed for final inspection and approval.**

Owner

_____/_____/_____
Date

IV. ARCHITECTURAL REVIEW COMMITTEE (ARC) REVIEW

The ARC will process this application without undue delay, although they have up to 30 days for review. The procurement of additional required information may extend the processing time and in no way may be construed to be a waiver of authority by the ARC. The architectural review process is described in the governing documents and the rules. If you wish to discuss this application with the ARC, contact the ARC Chair. If you disagree with the decision of the ARC, a written appeal to the Covenants Committee may be made within 10 days of receipt of the ARC decision.



V. ARCHITECTURAL REVIEW COMMITTEE (ARC) APPLICATION REVIEW:

ACTION: Approved [] Approved with Provisions [] Denied []

Comments _____

FOR ARC USE ONLY: Routing: 1. Association Site File, 2. Copy of completed application with ARC determination to owner.

Date of receipt: ___/___/___ ARC Determination Date: ___/___/___

[] Approved [] Approved with conditions [] Denied (See comments above)

ARC Representative _____

Sent to ACS West on: ___/___/___ Applicant notified on ___/___/___

Applicant appeal Date ___/___/___

Action

Taken: _____

Improvement Installed-Date: ___/___/___

___ As submitted ___ Not as submitted. Improvement is in violation as follows:

Committee Rep _____ Inspection Date ___/___/___