

**North Crossing Community Association
ARCHITECTURAL REQUEST APPLICATION**

Name: _____ Property Address: _____

Owner's Mailing Address: _____

Day Phone: _____ Evening Phone: _____

DESCRIPTION OF PROPOSED EXTERIOR CHANGE OR ALTERATION. Include as much detail as possible including photograph or drawing, materials to be used, style, and color and other helpful information. Provide a site plan or survey. If the work is to be performed by someone other than the Homeowner, please provide the contractor's name and telephone number if known. Attach a separate sheet if more space is needed.

Estimated beginning date: _____ Projected completion date: _____

I understand that approval does not relieve me of the responsibility for obtaining any and all necessary Building Permits, variances, and/or observing all local zoning ordinances. If approved by the Architectural Guidelines Committee (AGC) I agree to make the changes under the terms and conditions as specified in the approval letter. All improvements must be on my property or property lines. If any portion of the Association property is disturbed or damaged by either myself or my contractor, then I agree to be responsible for and to restore the common elements to their original condition(s).

Signature of Applicant: _____ Date: _____

PLEASE RETURN TO: North Crossing Community Association
5295 Westview Dr, Ste 125
Frederick, MD 21703
Fax 301-695-9557

Architectural Review Committee Consensus Action (Indicated by the ARC Chairperson's Signature):

•Approved As Is: _____
AGC Chairperson Date

•Approved With Conditions (See Attached ARC Letter For Conditions)

AGC Chairperson Date

•Not Approved (See Attached ARC Letter For Explanation)

AGC Chairperson Date