

Watson Farms REQUEST FOR ARCHITECTURAL CHANGE

1. Name:

Address: ID#

Phone: EMAIL ADDRESS:

FOR ALL SUBMISSIONS, THE FOLLOWING ATTACHMENTS ARE REQUIRED:

Submit a working drawing indicating all dimensions of the project and the location on the property if applicable. Or a detailed explanation of the architectural change request, (ex. Painting). The more details you can provide is appreciated.

If available, a photograph or drawing of a similar completed project

THE FOLLOWING ADDITIONAL ATTACHMENTS MAY BE REQUESTED AFTER FURTHER REVIEW:

A Plot Plan or a Surveyors Location Report of your lot should have been provided at closing.

Please indicate the location of the proposed addition / improvement will be installed (on a copy).

Please include **Elevations** and **Blueprints including the working drawings indicating all dimensions.**

THE COMMITTEE MAY TAKE UP TO 30 DAYS TO REPLY – PLEASE PLAN ACCORDINGLY – THANK YOU!

2. Requesting architectural approval of the following: Improvement Addition Repair/Replacement

Describe the proposed change:

Location: Dimensions:

Please list below the major construction materials that will be used in this project. Be as specific as possible:
Requests for exterior color/materials changes MUST submit samples of color, paint, brick, etc.
(Exterior materials must conform to the original construction or be sufficiently compatible.)

3 Project schedule:

A. The work will be performed by: Homeowner Contractor Name:

B. Subsequent to the committee approval,
please indicate the projected start date the projected end date

Please indicate all required permits (building, zoning, utility, etc.)

4. Will any part of the proposed improvement extend beyond your property line? Yes No

5. Will any part of the proposed improvement extend into any Common Area, any Utility, Drainage or Sewer Easement, Landscape, Preservation or Lake Easement shown on the plot plan of your lot? Yes No

Reset Form

ARCHITECTURAL CHANGE STANDARDS

I understand that under the Declaration and the rules and regulations, the Board will act on this request and provide me with a written response of their decision. I further understand and agree to the following provisions:

1. No work or commitment of work will be made by me until I have received written approval.
2. All work will be done at my expense and all future upkeep will remain at my expense.
3. All work will be done expeditiously once commenced and will be done in a good workman-like manner by myself and/or a licensed and insured contractor.
4. All work not completed within 180 days from the date of approval MUST resubmit for Committee Approval.
5. I assume all liability and responsibility for all damage and/or injury which may result from performance of this work.
6. I will be responsible for the conduct of all persons, agents, contractors, and employees connected with this work.
7. I understand that **any and all improvements placed in a drainage, utility, sewer, landscape or other easement is at my risk.** I accept the responsibility for repair and/or replacement of improvements when utility, drainage or sewer principals, developer or other authorized party removes improvements for access to the easement.
8. I will be responsible for complying with, and will comply with, all applicable federal, state and local laws, codes, the community governing documents, regulations and requirements in connection with this work, and I will obtain any necessary governmental permits and approvals for the work. I understand and agree that the Association, it's Board of Directors, its Agent and/or the Committee have no responsibility with respect to such compliance and that the Board of Director's and/or its designated Committee's approval of this request shall not be understood as the making of any representation or warranty that the plans, specifications or work comply with any law, code, covenant, regulation and/or requirement.
9. This request will not be considered for approval if shall owner is more than 30 days delinquent on any assessment dues.

I hereby acknowledge that I have read and understand the ARCHITECTURAL CHANGE STANDARDS set forth by the Board, as well as the Declaration of Covenants and Restrictions.

Homeowner's Signature: _____ **Date:** _____

NOTE: All submitted materials shall remain the property of the Association. You may wish to make a copy for your personal records.

For ALL Submissions
Be sure to include the requested attachments listed on the previous page. The more details you can provide is appreciated.

Please return the completed documents to:

Omni Management Services
PO Box 441570
Indianapolis, IN 46244
rmedsker@omni-property.com
Ph 317-541-0000 Fax 317-541-0002

----- **For Office Use Only** -----

Architectural Committee Action:

() Approved as submitted
() Approved with restrictions as follows: _____

() _____ Deferred: Please supply additional information:

() _____ Denied: ARB Comments:

() Other Comments: _____

Committee Signature: _____ **Date:** _____

Dear Homeowner:

Any lot improvement made or installed within an easement is at the owner’s risk regardless of the approval by the Architectural Control Committee. If for any reason repairs and or maintenance are required in the easement, any improvement(s) that are removed will not be reinstalled by the utility company or contractor.

This waiver must be signed and returned with the Request for Architectural Change, to protect you and the HOA of your community. It is to verify that you have a full understanding of the responsibilities and risk of developing an improvement into an easement.

If you are developing into an easement, it is also your responsibility to have the utilities marked prior to commencing by calling “Holey Moley” Indiana Underground Services @ 811.

EASEMENT WAIVER

This document is an acknowledgment that I/we, [redacted] NAME OF HOMEOWNER (S)
the owner(s) of the property located at: [redacted] STREET ADDRESS, [redacted] CITY, IN.
of the [redacted] Homeowners Association ID # [redacted] NAME OF SUBDIVISION

will be installing: [redacted]

that extends into a drainage and/or utility and/or sewage easement and accepts full responsibility of any cost to replace this improvement if the utility company, developer, or other authorized party needs to gain access to that area by removal of said improvement.

[redacted]
Signature of Homeowner

[redacted]
Date

[redacted]
Signature of Homeowner

[redacted]
Date

Return all required documentation to:

**Omni Management Services
PO Box 441570
Indianapolis, IN 46244**

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