

The Ridings at Brookside Association

REQUEST FOR EXTERIOR ALTERATIONS – BUILDING ONLY

(NOT for Landscaping Exterior Alterations)



UNIT OWNERS: _____

ADDRESS: _____

HOME PHONE: _____ CELL PHONE: _____ EMAIL: _____

DESCRIPTION OF PROPOSED ALTERATION (Write on separate sheets of paper attached to this form if necessary):

Please supply the following as they pertain to your project:

- * Name, address & telephone # of Contractor
- * Supporting plans, photos, brochures, etc.
- * Description of materials, color, size etc.
- * Project start and completion dates.
- * Contractor requirements
- 1. Repair of any damage done to common areas.
- 2. Proof of liability insurance (certificate to be included with request).

Unit Owner understands that no work is to begin prior to written approval being received.

All work done will comply with approved plans; any changes or modifications will require resubmission. The Unit Owner is responsible for seeing that all Association requirements are met and assumes any damage to the common areas and meeting all local codes and permit requirements. *The Board shall have the obligation to answer any written request received by it from a Unit Owner for approval of a proposed structural addition, alteration or improvement to his Unit within forty-five (45) days after receipt of such request, and failure to do so within the stipulated time shall constitute a consent to the proposal.*

Any approved alterations will be the unit owner's responsibility to maintain at the unit owner's expense and subsequent unit owner's expense.

IF ANY DIGGING IS NECESSARY, UNIT OWNERS ARE REQUIRED TO CONTACT PENNSYLVANIA ONE CALL TO IDENTIFY UNDERGROUND UTILITY LINES, PRIOR TO THE START OF THE PROJECT. THEY CAN BE REACHED AT 1-800-242-1776.

Unit Owner understands the terms and conditions of this exterior alteration request as indicated by signature below:

Unit Owner(s) Signature(s): _____ Date: _____

The Unit Owner acknowledges that by signing this form has authorization from said Unit Owners prior to making this request for alterations.

.....
ARCHITECTURAL REVIEW COMMITTEE RECOMMENDATION:

APPROVED DENIED APPROVED WITH THE FOLLOWING STIPULATIONS:

ARC Member Signature: _____ Date: _____

.....
BOARD DECISION (Homeowner must have Board written approval prior to proceeding with this request):

APPROVED DENIED APPROVED WITH THE FOLLOWING STIPULATIONS:

Board Member Signature: _____ Date: _____

RETURN ALTERATION REQUEST TO: ekahn@danellarealty.com

**The Ridings at Brookside, c/o Danella Realty & Mgmt., P.O. Box 1017,
Blue Bell, PA 19422 (610) 834-6200, (866) DANELLA, (610) 834-6204 Fax**