

**THE VILLAS AT SHREWSBURY (TVAS) CONDOMINIUM ASSOCIATION
ARCHITECTURAL / LANDSCAPING REVIEW REQUEST**

Homeowner Details

Name:

Address:

Telephone Number(s):

Email Address:

Date of Request:Date Received at Community Asset Mgmt:

Is this an **ARCHITECTURAL** or **LANDSCAPING** Review Request? (Please underline one)

Description of Project

Describe the essence of your project. Attach detailed drawings, plans, specifications and other relevant information including dimensions, locations, materials, and colors.

Does this intended project fully meet an existing Architectural or Landscaping Rule? **YES / NO**

(Please circle one)

Which rule?

Anticipated Start Date:

Anticipated Completion Date:

Signature of Homeowner:

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ARCHITECTURAL / LANDSCAPING REVIEW REQUEST**

Homeowner Address: **PC / FC** (Please add unit number and circle one)

Approvals

Have you applied for and acquired all necessary local permits? **YES / NO** (Please circle one)

Do not start your project or commit any contractor to any aspect of your intended project until you receive all necessary local permits and signed approval from the Executive Board.

By Architectural or Landscaping Committee

Recommended as proposed Date: Signature:

Recommended with changes noted Date: Signature:

Not Recommended Date: Signature:

By Executive Board

Preliminary approval as proposed Date: Signature:

Provisional approval with changes noted Date: Signature:

Request denied Date: Signature:

Final Inspection and Approval Date: Signature:

Changes Required / Reasons for Denial

By Architectural or Landscaping Committee

By Executive Board

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ARCHITECTURAL / LANDSCAPING REVIEW REQUEST**

**Completion of an Architectural or Landscaping Review Request
(This form is an important document in the administration of your intended project.)**

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Homeowner Details: Complete this section fully with your name, address, preferred telephone number(s) and an email address. The email address will allow for faster communication with you.

Date of Request: Give the date of your submission to Community Asset Mgmt.

Date Received at Community Asset Mgmt. (CAM): This will be entered by CAM and marks the initial processing of your request.

Architectural or Landscaping Request?: This is a common form for use by both committees and the Executive Board. If your project is clearly an architectural or landscaping one, please indicate. Otherwise, leave this unmarked for the appropriate committee and/or Executive Board to decide.

Description of Project: On this section of the form write a brief description of your project. You do not need to explain the reason for wanting to undertake your project, but you must provide drawings and sketches which show clearly the location and the dimensions of the project. For clarity, you may not be able to give all of the necessary detail on this part of the form, so you are encouraged to add additional sheets giving the specifications of the parts of your project and color charts, if for an architectural project, you are making a color choice. You may add relevant material from your intended contractor(s).

For some projects there may be a need for you to obtain the approval of the Township and other authorities particularly if the project is a deck when building permits must be issued and other inspections carried out. You are responsible for applying for such permits and these building code requirements take a priority over any of the TVAS requirements.

Project meets an existing rule: If your intended project does **fully** meet an existing rule, please indicate which rule. Refer to the latest Rules and Regulations for what is allowed.

Dates: Both the anticipated start date and completion dates are important. Once you have received the necessary approvals to start your project, you will have 45 days in which to actually start your project. After this period your approvals will expire. You will need to resubmit your application if you intend to return to your project.

Signature: Please sign your completed application.

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Address: Please indicate your address in note form. If this page is separated from Page 1 it will be easily identified.

Approvals: Please answer the question about necessary local permits. The remaining approvals will be completed by the appropriate committee and the Executive Board as your Review Request is processed.

**SUBMIT YOUR COMPLETED FORM TO: COMMUNITY ASSET MANAGEMENT,
910 S. George Street, York, PA 17403 - Attn: Joy Jackson
or email to Joyjackson@commpropmgt.com**