ARCHITECTURAL REVIEW COMMITTEE REQUEST FOR CHANGE OR MODIFICATION FORM

Name of Petitioner:		Date:	
Address:		Phone:	
Description of Proposed Change or Modification and Reason:			
ALL PROPOSED CHANGES AND ON A SEPARATE SHEET OF PAR		S MUST BE ACCOMPANIED BY A DETAILED SKETCH	
	on of all work to loposed work, if ap lumber and mate	pplicable crials to be used work along with a Certificate of Insurance to be	
	ore commenceme	nge and/or modifications might require a permit by ent. Article 6 of the Park Place Declaration provides respond to this request.	
Petitioner's Signature (s):		Date:	
☐ Approval of the SPECIAL EX	_	d with the following conditions:	
☐ Approval of the SPECIAL EX	CEPTION denied	with the following conditions:	
ARCHITECTURAL CHAIRMAN	DATE	PARK PLACE BOARD PRESIDENT	

FOLLOWING APPROVAL BY THE ARCHITECTURAL REVIEW COMMITTEE, THE HOMEOWNER OR CONTRACTOR IS FULLY RESPONSIBLE FOR OBTAINING ANY AND ALL APPLICABLE PERMITS FROM THE PROPERTY GOVERNMENTAL BODY.

AFTER ALL PERMITS ARE RECEIVED AND IN GOOD ORDER, THE ARCHITECTUAL COMMITTEE SHALL BE NOTIFIED BEFORE COMMENCEMENT OF WORK. WORK SHALL BE COMPLETED WITHIN 30 DAYS OF APPROVAL.

SUBMIT THIS FORM TO: PARK PLACE HOMEOWNERS ASSOCIATION, 975 EASTON ROAD, SUITE 102, WARRINGTON, PA 18976. FAX: (215) 491-5620