

# TIMBERLEAF HOMEOWNERS ASSOCIATION ARCHITECTURAL CHANGE REQUEST

**Date Submitted:** \_\_\_\_\_

Name: \_\_\_\_\_ Property Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Check Type of Improvement, Change, or Addition:

\_\_\_ Shed \_\_\_ Fence \_\_\_ Patio \_\_\_ Deck \_\_\_ Gazebo \_\_\_ Other: \_\_\_\_\_

Estimated Beginning Date: \_\_\_\_\_ Projected Completion: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

This form, with supporting illustrations/drawings, must be sent to the Timberleaf Homeowner's Association (THOA) and you **must receive approval before any work is done on your lot**. Your request will be reviewed **within 14 days** of receipt by the THOA Board of Directors.

**PLEASE RETURN TO:** Timberleaf Homeowners Association, P.O. Box 4, Camby, IN 46113

1. Describe the proposed change in detail: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. Will there be changes or modifications in basic utility services or existing structures to accommodate the proposed change? Please indicate below:

	Yes	No		Yes	No		Yes	No
Cable TV	___	___	Drainage	___	___	Electric	___	___
Exterior Walls	___	___	Gas	___	___	Patio fencing	___	___
Patio slab	___	___	Pavements	___	___	Sewage	___	___
Sidewalks	___	___	Telephone	___	___	Water	___	___

3. Please list major construction materials which will be used in this project. Be as specific as possible (exterior materials must conform to those used on the original building or be sufficiently compatible).

Fencing (material, height, length): \_\_\_\_\_

Wall (material, height, length, depth): \_\_\_\_\_

Other: \_\_\_\_\_

4. Will the proposed project extend beyond your property line? \_\_\_ Yes \_\_\_ No

If yes, explain WHY and provide the name and address of affected homeowner.

Explanation: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

5. The project will be completed by:  Homeowner  Contractor(s)  Both

If applicable, list professional service contractors to be used on project:

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

6. Attachments:

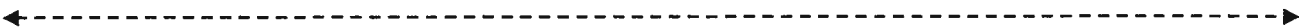
- A. **Plot Plan (required for all applications):** You may obtain by calling the Planning and Zoning Office at 317-327-8700. In addition to the Plot Plan, you may also provide a blueprint or hand-drawn layout of property showing existing structures and intended improvements. You must show all applicable dimensions on the plot plan.
- B. **Permits (as required by local government):** If your improvement project requires a City or County construction permit (i.e. in-ground pool installation), those completed permits must be attached to this application.
- C. **Construction Specifications (required for concrete work):** If your improvement project requires a City or County construction permit (i.e. in-ground pool installation), those completed permits must be attached to this application.
- D. **Photographs (recommended) of similar construction projects.**

**WARNING: It is the property owner's responsibility to determine if approval is needed by the local governing body (Marion County, Decatur Township, etc.). Approval by the appropriate governing body does not relieve the property owner of the responsibility to obtain approval from the Timberleaf Homeowners Association Review Committee, nor does approval from the Timberleaf Homeowners Association Review Committee relieve the property owner of responsibility to obtain the required governing body approval.**

**I hereby acknowledge that I have read and understand the guidelines for architectural improvements as stated in the Covenants & Restrictions of the Timberleaf Homeowners Association.**

\_\_\_\_\_  
Homeowner's Signature

\_\_\_\_\_  
Date



**Timberleaf Homeowners Association Board of Directors Action:** Date Received: \_\_\_\_\_

Approved  Approved w/conditions on attached letter

Denied, due to following reason(s): \_\_\_\_\_

**Review Committee/Board Signatures:**

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

Note: All submitted materials shall remain the property of THOA. You may wish to retain a copy for your own records.