Westshore Townhomes POA, Inc. Architectural Change Form

Date:			
From:	(Homeowners Name)		(Contact Telephone Number)
	(Street Address)		(Email Address)
	(Mailing Address if different	than Street Address)	
I/We DC		copy of current Deed Restrictio	ns. ations as they relate to this project.
i, we ii.	TAVE NOTR	ead and understand the Declar	ations as they relate to this project.
I/We, th	e owner(s) of the above prope	rty, seek approval by the HOA	Board of Directors to perform the following modifications:
Please s	ubmit Photographs Drawings / Lights Windows Storm Shutters	Doors/Sliders Enclosure	erations; any supporting documentation for the below: of proposed modification(s).
	e owner(s) of the above prope o do so will result in an automa		ems MUST be submitted with the application, and that
		rty understand that failure to per request until they are submitt	provide the following items (as they relate to the request) ared to
respons Rules an regulation liability of regulation with you	ible for determining whether to de Regulations, applicable laws ons to include all the Deed Res or obligation to determine who ons, codes or ordinances. Pleas or project. Submit this request	he improvements, alterations of codes and ordinances: including trictions and Covenants and but ther such improvements, alter se allow up to 30 days to receive and any additional required do	nowledges and agrees that the undersigned shall be solely or additions described herein comply with all Declarations, ng, without limitation, zoning ordinances, subdivision tilding codes. Westshore Townhomes POA, Inc. shall have no rations and additions comply with any such laws, rules, e a decision from the Board of Directors before proceeding tournentation via hand delivery, or mail. The 30-day time on supporting this request is received.
	SIGNATURE OF OWNER:		
	_REQUEST APPROVED	Signature of Board Memb	er
	REQUEST DENIED	Reason for Denial	