

## FORM FOR REQUESTS FOR IMPROVEMENT / MODIFICATION REVIEW

**Note: This form must be completed and returned prior to commencing any work.** Incomplete Forms will be returned. Documentation submitted for review will become the property of The Communities of Wellington Homeowners Association. **Please be advised that a fine of \$ 200.00 will be assessed for failing to submit a request form for review and approval prior to work being commenced.**

Name:		Date:	
Address:		Home Phone:	
City State/Zip:		Office Phone:	
Email:		Cell:	

Once completed, please return this form to HMS by fax to 770-667-6315, by email to [Kathy.Riccobono@hms-inc.net](mailto:Kathy.Riccobono@hms-inc.net), or by mail to: TCO Wellington, c/o HMS Inc., P.O. Box 2458, Alpharetta, GA 30023-2458

### Minor Modification

Description of modification ( be sure to review relevant guidelines(s) before submission):

### Moderate Modification

<input type="checkbox"/> Deck <input type="checkbox"/> Fence <input type="checkbox"/> Gazebo <input type="checkbox"/> Hot Tub <input type="checkbox"/> Retaining Wall <input type="checkbox"/> Screened Porch             Other _____
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### Major Modifications

<input type="checkbox"/> Exterior Addition <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Exterior color modification:
<div style="margin-left: 150px;"> <b>Exterior siding/stucco</b> _____  <b>Shutter and Front Door</b> _____            (colors <u>must</u> be the same)  <b>Trim and Garage Door</b> _____            (colors <u>must</u> be the same)         </div>

Please provide the ACC with all the information necessary to evaluate your request thoroughly and quickly. Request must include, without limitation, the following information: A site plan(including all dimensions), color chips (if applicable) and detailed description of the request, list of materials, pictures, brochures (if applicable) and any other information as specifically required below or as required by the Community Design Guidelines for The Communities of Wellington.

Description of Improvements or Modification Request (attach separate sheets if necessary);			
Estimated Start Date:		Completion Date:	

Please refer to the Guidelines for required information to be included with this form – incomplete forms, including missing information will be returned without review.

I understand and agree that no work on this request shall commence until written approval of The Communities of Wellington AECC has been received by me. I represent and warrant that the request improvements and /or modification strictly conform to the *Community Design Guidelines* and that these changes shall be made in the strict conformation to those guidelines. I understand that I am responsible with all city, county and state regulations.

Permission is hereby granted for members of the AECC and appropriate Communities of Wellington Homeowner Association representatives to enter the property to make reasonable observation and inspection of the requested modification and completed project.

Neither The Communities of Wellington Homeowners Association, the Association Board of Directors, the AECC nor their respective members, officers, successors, assigns, agents, representatives or employees shall be liable for damages or otherwise to anyone requesting approval of an architectural alteration by reason of mistake in judgment, negligence or non-feasance, arising out of any action with respect to any submission. The architectural review is directed toward review and approval of site planning, appearance and aesthetics. None of the foregoing assumes any responsibility regarding design or construction, including, without limitation, the structural integrity, mechanical or electrical design, methods of construction or technical suitability of materials. I hereby release and covenant not to sue all of the foregoing from/for any claims or damages regarding this request or the approval or denial thereof.

Neighbor's signature \_\_\_\_\_ Address \_\_\_\_\_ Date \_\_\_\_\_

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Neighbor's signature \_\_\_\_\_ Address \_\_\_\_\_ Date \_\_\_\_\_

**I have discussed this modification with my neighbors who will be directly impacted by the proposed modification.**

Homeowner's signature \_\_\_\_\_ Date \_\_\_\_\_

Homeowner's signature \_\_\_\_\_ Date \_\_\_\_\_  
**(All owners must sign)**

Please allow a maximum of **forty-five (45) days** for a modification review approval. If modification is started prior to approval, approval will be denied.

**It is the homeowner's responsibility to monitor construction and enforce the items of this approval. No alterations in the approval plan are allowed. Failure to follow the items of this approval will result in an unapproved exterior modification. The homeowner then accepts full responsibility, at their own expense, for removing the unapproved structure or altering the structure in order to bring it into compliance with the approval plan.**