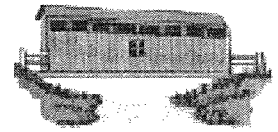




**PLEASE SUBMIT TO  
WOODBRIDGE CROSSING HOA  
C/O PROFESSIONAL COMMUNITY MANAGEMENT  
1111 BENFIELD BLVD., SUITE 110  
MILLERSVILLE, MD 21108  
(410)721-0777**



<http://woodbridgexcrossinghoa.googlepages.com/>

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

e-mail \_\_\_\_\_

DESCRIPTION OF IMPROVEMENT: Provide a general description of intended addition or modification and attach supporting documents (plot plan, diagram/sketches, drawings, specifications, permits, pictures, samples, etc.). The plot is the official survey of the property and its legal lot lines. Indicate on this plot map where your project will be placed (distance from side and back yards). Complete one form per project and refer to Architectural Guidelines for general project and submission requirements. This application will not be considered complete until all of the necessary documentation is attached at which time the (60) sixty day review process will begin as long as all homeowner fees are paid in full.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List attachments : \_\_\_\_\_

Start Date \_\_\_\_\_ Completion Date \_\_\_\_\_

Have you obtained a permit?  Yes  No  Not Required

I/We hereby submit this request package for the improvement described above in accordance with all applicable laws, codes and regulations as well as Association guidelines and rules. I/we are responsible for obtaining all necessary permits and inspections for the requested addition or modification. I/We acknowledge and agree that I/we will be solely liable for any claims, including and without limitation, for property damage or personal injury, which results from the requested improvement and hereby indemnify the Woodbridge Crossing Homeowners Association from and against any and all such claims. Further, I/we will properly use and maintain said addition or modification in accordance with applicable codes, ordinances and community regulations. I/We am (are) responsible for all maintenance, repairs and upkeep of said improvement. I/We give permission to the Board and/or Architectural Committee to enter the respective Lot prior to, during and upon completion of the addition or modifications for the purposes of, but not the obligation to, review such conditions. I/We understand that upon request, the Architectural Committee will review the addition or modification at completion and provide an acceptance certificate. However, I/We understand and acknowledge that neither the Board or Architectural Committee's review or approval of the plans or inspection of completed work may or will relieve me/us or any future owners from the responsibility to comply at all times with all laws, codes and regulations. I/We have provided all information to be complete and accurate to the best of my/our knowledge.

Owner \_\_\_\_\_ Signature \_\_\_\_\_ Co-Owner \_\_\_\_\_ Signature \_\_\_\_\_

*Any exterior modifications done without prior written approval may result in restoring the property back to its original condition and or a fine being assessed. Any legal costs will be brought forth to the owner (s) of the lot. The authority granted by approval of the Request is rescinded and revoked automatically if the requested alteration, change, construction or modification has not commenced within one-hundred eight days (180) of the approval of this request and /or completed by any date specified by the board.*

*(For ARC use only)*

Date received by Management

\_\_\_\_\_

Signature

Date

Date received by ARC Chair

\_\_\_\_\_

Signature

Date

First Review

Reviewed by

\_\_\_\_\_

Date

Approved

Conditional Approval

Disapproved

Incomplete

Comments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Results mailed to owner by:

ProCom Mgmt.

ARC Chair

Date

\_\_\_\_\_

*Second Review (Use if first review resulted in disapproval, incomplete, or conditional approval)*

Reviewed by

\_\_\_\_\_

Date

Approved

Conditional Approval

Disapproved

Incomplete

Comments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Results mailed to owner by:

ProCom Mgmt.

ARC Chair

Date

\_\_\_\_\_

*Appeal (Use if homeowner requests an appeal)*

Reviewed by

\_\_\_\_\_

Date

Approved

Conditional Approval

Disapproved

Incomplete

Comments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Results mailed to owner by:

ProCom Mgmt.

ARC Chair

Date

\_\_\_\_\_

Final Inspection

Inspected by

\_\_\_\_\_

Date

\_\_\_\_\_

Approved

Conditional Approval

Disapproved

Incomplete

Comments

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Results mailed to owner by:

ProCom Mgmt.

ARC Chair

Date

\_\_\_\_\_