

Received: _____

LEGACY GROVE HOME OWNERS ASSOCIATION VARIANCE REQUEST FORM

Submit plans to: Architectural Review Committee (ARC)
17104 Highway 72
Athens, AL. 35613 _____

NAME: _____ PHONE (H): _____ OTHER: _____

ADDRESS: _____ LOT NUMBER: _____

DATE: _____

In accordance with the Legacy Grove Covenants, Article 45, Section 02, I hereby request your consent to make the following changes:

Alterations _____ Additions _____
Renovations _____ Landscape _____

Description of work to be done:

****PLEASE NOTE: please submit with your application a detail (to scale) drawing or blueprint of your plan(s) and a copy of either your property plat map or your survey. All requests for additions, fence installations, patio addition/modifications, screen enclosure, etc. must have attached to this request a brief description of your proposed changes.**

Is this an amendment to a previous request? Yes _____ No _____ If yes, approximate date of previous request _____

I understand that the Architectural Review Committee will act on this variance request and provide me with a written response no later than 30 days after receiving my request.

I further understand and agree to the following provisions:

1. All work will be done at my expense and I am responsible for any and all preservation of such alterations/additions.
2. All work will be done expeditiously once commenced and will be done in a good workman like manner by myself or a contractor in compliance with the approved plan(s) and building permit if applicable.
3. I assume all liability and all responsibility for any and all damage and/or injury, which may result from performance of this work including any damages to common areas or other private property.
5. I will be responsible for the conduct of all persons, agents, contractors, and employees who are engaged to carry out the construction of the approved plans and/or variance request.
6. I will comply with Legacy Grove Declaration of Restrictive Covenants, By-Laws and Rules.
7. I will comply with all applicable federal, state, and local laws, ordinances, building codes and regulations that are requirements in connection with this work and will obtain any necessary government permits and approvals.

I understand and agree that the Legacy Grove Homeowners' Association, its Board of Directors, its agent and the ARC Committee have no responsibility with respect to such compliances and it is expressly understood that the Board of Directors or its designated committee's approval of this request shall not be construed as the making of any representation or warranty that the plans, specifications or work comply with any law, codes, regulations, or any other governmental requirement.

The work will be done by: Homeowner _____ Contractor _____

If contractor is used, provide name, telephone number and license number:

If approved, work would start on or about the ____ day of _____, ____ and completed on or approximately the ____ day of _____, ____.

NOTE: Work must be completed within 1 year after the receipt of written approval.

I understand that by not obtaining prior approval, I will be subject to the conditions outlined in Article 45, Section 06.

I agree to allow all follow-up inspections on my property (exterior only) by the Association's designated representative during and upon completion of work. The homeowner agrees to submit a written notice of completion of the work to the ARC Committee within ten (10) days after work is completed.

Notice to applicant: No work or commitment of work can be made until you receive written approval from the Architectural Review Committee. If you begin work prior to the written approval, all alterations, changes, additions etc. may have to be removed at your own expense.

Signature of homeowner

Print name of homeowner

Action taken by Architectural Review Committee (ARC)

Approved as requested _____

Approved with the following exceptions _____

Disapproved _____

Date: _____

You may appeal this decision to the Board of Directors within 30 days